Admission Papers

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998

Geo Brigham

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the place of birth of the patient? — Windy Hill near Hutton Rudby Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

None

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Disposition & character mild & retiring but unaccompanied by any eccentricity or peculiarity —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Not more than ordinary — received a Boarding School education at Northallerton —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Bankers Clerk for 18 or 19 years — very industrious, temperate & of most regular conduct during the whole of that time

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

a strong bias for general literature & much interested in the politics of the day

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Not any so far as his Friends have been able to ascertain —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

No — He sometimes complained of debility but appeared to enjoy ordinary health

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? The only instance of the kind — an Aunt (Sister of the Patient's Mother) many years since was in a low & desponding way but after about 3 months illness she recovered & since that time has been quite sane ~~[illegible]~~ she is still living and in good health

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? — Some 10 days since an occurrence took place at his Lodgings which caused him to charge his Landlady with unchaste conduct with a Married Lodger living with his Wife & Family in the same House — this circumstance altho appearing most unlikely to his Friends, seemed to have caused a suspicion or jealousy in the Patient's Mind & upon which

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

he seemed to be constantly brooding some days previous to the first intimation of Mental aberration — It is understood from want of direct evidence to prove the charge he had to make an apology to the Gentlemen seemingly against his convictions but whether the charges were made by the Patient in a state of sanity or not it is impossible for his Friends to say

1

14. At what age was the patient first attacked with symptoms of insanity

15. What has been the duration of the present attack?

Supposed to have been about 10 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

A great depression of spirits & his sleep was greatly affected.

19. What were the first decided symptoms of mental aberration? A desire to connect unlikely events & circumstances, so as to solve a supposed mystery which seemed to prey upon his mind

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

His mind is affected by various subjects but the predominant one appears to be religious

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Occasionally refuses food & is extremely suspicious of what is given him & obstinately declines to take Medicine

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

He had 4 doses of Morphia given in Tea at intervals of about 6 hours each which appear to have had little soothing effect on his mind

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing but there are lucid intervals of short duration at uncertain periods

William Robert Brigham
Draper &c Stockton on Tees

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Messrs Backhouse
Bankers, Darlington

William Robert Brigham
Draper &c
Stockton on Tees.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive George Brigham a (a) person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said George Brigham

Signed, *Name,* William Robert Brigham

Occupation (if any) Draper &c

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Brother

Dated, *this* Eighth *day of* February

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

To John Kitching M.R.C.S.

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	George Brigham
Sex and Age	Male – 35 next birthday
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Bankers Clerk
Religious Persuasion, so far as known	Protestant (Church of England)
Previous Place of Abode	Darlington
Whether First Attack	Yes
Age (if known) on First Attack	
When and where previously under Care and Treatment ..	
Duration of existing Attack	10 days
Supposed Cause	
Whether subject to Epilepsy	No
Whether Suicidal	
Whether Dangerous to others	No not to present time
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) William Robert Brigham

Occupation (if any), Draper &c

Place of Abode, Stockton Tees

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Brother

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

I, the undersigned Geo R Slader being a (c) member of the College of Surgeons of London and being in actual practice as a (d) Surgeon hereby certify, that I, on the fifth day of February at (e) 2 Elton Terrace Darlington in the County of Durham separately from any other Medical Practitioner, personally examined (f) Geo Brigham Bankers Clerk × and that × of 30 Skinnergate Darlington the said Geo Brigham is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Manner & incoherent conversation viz that I had entered into a conspiracy with others to take away his life.

2. Other facts (if any) indicating Insanity communicated to me by others (i). singing during the night

Signed, *Name,* Geo R Slader

Place of Abode, Darlington

Dated, this 8th day of February

One Thousand Eight Hundred and ~~Fifty~~ 61

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of ——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

MEDICAL CERTIFICATE—Sched. A. No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned, Frederick George Clarkson
being (a) Doctor of Medicine of the University of St Andrews.
and being in actual practice as a (b) General Practitioner
hereby certify, that I, on the eighth day of February 1861 at (c)
2 Elton Terrace, Darlington in the County of
Durham separately from any other Medical Practitioner,
personally examined (d) George Brigham, Darlington, Banker's Clerk
residing at 30 Skinnergate, Darlington and that
the said George Brigham is a (e)
person of Unsound Mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). 1st Incoherence — 2d Altered Manner
3d Existence of Delusions, such as a belief in a conspiracy to poison, and that this has existed from the time of Queen Anne — that God has appointed as a ministering agent a man who he confesses committed suicide years ago — &c &c

2. Other facts (if any) indicating Insanity communicated to me by others (g).
Marked dislike to a brother to whom he was until the appearance of her present malady, attached, and suspicion that he is in the conspiracy to poison —
A professed belief that murder is in the sight of God a pardonable offence.

Signed, Name, Frederick George Clarkson, M.D. & L.S.A.

Place of Abode, 8 Paradise Row, Darlington

Dated this eighth day of February

One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

(a) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) A. B. of——, insert residence and profession, or occupation (if any).
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Medical Superintendent,
The Retreat,
York.

Eliz^h Cole. 999

NOTICE OF ADMISSION.

Sched. (C.) Sect. 24.

Friends Retreat York

~~LONGWOOD HOUSE~~ **LUNATIC ASYLUM.**

I hereby give you Notice, That

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

Day of 185 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

Subjoined is a Statement with respect to the Mental and Bodily Condition of the above-named Patient.

Signed, _____

(c) _____

_____

Dated this Day of

One Thousand Eight Hundred and Fifty

To the _____

_____

STATEMENT.

I have this Day (d) seen and examined

. the Patient mentioned in the above Notice, and hereby Certify, that with respect to Mental State he

.

.

and that with respect to Bodily Health and Condition he

Signed, _____

(e) _____

Dated this Day of

One Thousand Eight Hundred and Fifty

Lunatics 1.

(16 & 17 Vict. c. 96.)

Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane,
Publishers of the "*Justice of the Peace,*" a Weekly Legal Journal, price 6d. stamped.

(a) House or hospital.

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

(c) Superintendent or Proprietor of ——.

(d) *Some day not less than two clear days after the admission of the patient.*

(e) Medical Proprietor or, Superintendent, or Attendant of ——.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Elizabeth Cole.

a (*) Person of Unsound Mind as a Patient into your (*) House.
Subjoined is a Statement respecting the said

Signed, *Name,* George Cole

Occupation (if any), None

Place of Abode, 7 James St Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 27th Day of Feby.
One Thousand Eight Hundred and ~~Fifty~~ Sixty One

To John Kitchin. Esqr.
(*) Superintendant (*) of Friends Retreat. York

STATEMENT.

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

Name of Patient, with Christian Name at length	Elizabeth Cole.
Sex and Age	Female - 69 years of age
Married, single, or widowed	Single
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious Persuasion, as far as known	Member of Society of Friends.
Previous Place of Abode	7 James St. Ashley Road. Bristol.
Whether First Attack	First attack.
Age (if known) on First Attack	69 years.
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	Two months.
Supposed Cause	Fretting on account of my children leaving home
Whether subject to Epilepsy	No
Whether suicidal	Has expressed a wish to take a weapon life.
Whether dangerous to others	Has used threatening language to and has violently seized hold of persons.
Whether found lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None

Signed, *Name,* (*) George Cole

Occupation (if any), None

Place of Abode, 7 James St. Bristol

Degree of Relationship (if any) or other circumstances of connexion with the Patient Brother

(a) Lunatic, or an idiot, or a person of unsound mind.
(b) House or hospital.
(c) Proprietor or superintendent of.
(d) *Describing the house or hospital by situation and name, if any.*

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

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

I, the undersigned, John Davis,
being a (a) Graduate in Medicine, University of Edinburgh, a Member of the Royal Colleges of Physicians, and Surgeons England, and a Surgeon in the Royal Navy,
and being in actual practice as a (b) Physician, at Bristol.
hereby certify, that I, on the twenty seventh day of February 1861. at (c) No 7 James Street, Ashley Road, Bristol, in the County of Bristol, separately from any other Medical Practitioner,
personally examined (d) Elizabeth Cole, — Gentlewoman
and that
the said Elizabeth Cole is a (e) person of unsound mind, and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Great despondency of manner combined with incessant restlessness, and apprehension of some calamity impending, which the Patient cannot define, admits having been sometimes tempted to injure herself.—A well marked case of Melancholia

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her friends informed me that the foregoing symptoms have been of late aggravated, that she does not take food, or sleep well, and they attribute her despondency to having recently parted with her Nieces

Signed, *Name,* John Davis, M.D. Edin.

Place of abode, 34 Wilson Street, Portland Square, Bristol.

Dated this twenty seventh day of February, One Thousand Eight Hundred and ~~Fifty~~ Sixty One.

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

I, the undersigned, John Pince Challacombe
being a (a) Doctor of Medicine of the University of Edinburgh (Registered)
and being in actual practice as a (b) General Practitioner at Bristol
hereby certify, that I, on the Twenty Seventh day of Feby. 1861 at (c) 7 James St. Ashley Road. Bristol in the County of ~~Somerset~~ Bristol separately from any other Medical Practitioner,
personally examined (d) Elizabeth Cole of 7 James St, Ashley Road. Bristol
and that
the said Elizabeth Cole - Gentlewoman is a (e) Person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Great restlessness and excitability of manner - Has told me that she has a continual dread of something dreadful about to happen - and that she feels a desire to mischief to others - and destroy the furniture about her.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Has been seen crawling about on her knees upon the floor - having no object in view. Has violently caught hold of her relatives threatening harm - and also asking for something with which to destroy herself.

Signed, *Name,* John P. Challacombe MD.

Place of Abode, 21 Stokes Croft. Bristol

Dated this Twenty seventh day of Feby. One Thousand Eight Hundred and ~~Fifty~~ Sixty One.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—* Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation (if any).*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Elizabeth Cole 999

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She is a member by birthright.

2. Where was the place of birth of the patient?
Thornbury. Gloucestershire —

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
In Childhood - physically ~~weak~~ & mentally weak —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Want of mental vigour. eccentric & peculiar.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She understood any not much cultivated but affections decidedly so Very little school education & that at home - & a very short time at a boarding School - of the Society of Friends —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
House hold employments - of most orderly habits, temperate, & regular conduct during her whole life —

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Never Married —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
No —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
Considerable pecuniary loss - & disappointed affection, by attachment to a party who never took any particular notice of her

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?
No —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? There has been two instances of insanity in the family

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
The immediate cause. we believe. was the leaving home of her two nieces - to go & reside with their mother at Birkenhead —

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

For many years past. but not sufficiently so for restraint until since the last two or three months -

15. What has been the duration of the present attack?

Since that time

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

~~Impossible to say~~ We believe this is the first attack of decided insanity but symptoms of have occurred for short periods for years past intermittently

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

There was no interval, but always depressed at times but perfectly harmless, and well attended to this attack

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Prior to this attack, she was always depressed in spirits, but no particular change in temper, or conduct but always complained of want of sleep

19. What were the first decided symptoms of mental aberration?

About the commencement of this year she showed symptoms of mental aberration by threatening to strike her mother without the least provocation

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

By taking a great dislike to her brother and his children by threatening to take her own life and not living with her in the house, no particular delusion

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She is prone to acts of destruction & violence but never committed any dangerous act excepting as stated above -

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She denied herself food. and asked for something to destroy her life,

23. What are the habits of the patient as regards personal cleanliness and decorum?

She was inclined since the last attack to be of dirty habits, her conversation never offensive.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is in good bodily health, and was so up to the time of her leaving for her present abode -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has never been in any private or public asylum before now

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

She was attended by the family surgeon & recommended by him to be sent to her present abode

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be increasing. there has been lucid intervals. there is no particular time or period that the change occurs

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Walter Sturge
9 Cotham Road
Bristol

OBSERVE.—It is required in signing the Medical Certificate, that the qualification of the Medical Practitioner, the residence and occupation of the Patient, and the address of the House at which the examination is made, should be set forth in words in the body of the Certificate.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Cole a (a) person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Elizabeth Cole

Signed, *Name,* Walter Sturge

Occupation (if any) Land Agent

Place of Abode, Cotham Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Trustee

Dated, this twenty seventh day of second month

One Thousand Eight Hundred and ~~Fifty~~ sixty one

To John Kitchener M.R.C.S.

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Elizabeth Cole
Sex and Age	Female – 69 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious Persuasion, so far as known	Member of Society of Friends
Previous Place of Abode	No 7 James St Ashley Road Bristol
Whether First Attack	Yes
Age (if known) on First Attack	69 years
When and where previously under Care and Treatment ..	Never
Duration of existing Attack	Two months
Supposed Cause	Grieving about the loss of my Children
Whether subject to Epilepsy	No
Whether Suicidal	Has threatened her own life
Whether Dangerous to others	Yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	None

Signed, *Name,* (b) George Cole

Occupation (if any), None

Place of Abode, 7 James St Ashley Road

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Brother

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

I, the undersigned Samuel William North being a (c) Member of the Royal College of Surgeons in London and being in actual practice as a (d) Surgeon hereby certify, that I, on the 28th day of February at (e) the house of John Clark Huntington Road in the County of York separately from any other Medical Practitioner, personally examined (f) Elizabeth Cole Spinster of 7 St James Street Ashley Road Bristol, Bristol and that the said Elizabeth Cole is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Her manner is restless her countenance expressive of great mental disturbance she is melancholic her whole manner & conversation being indicative of despondency & she desires to die as the only relief to her misery

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

Signed, *Name,* Samuel Wm North

Place of Abode, 16 Castlegate York

Dated, this 28th day of February

One Thousand Eight Hundred and ~~Fifty~~ sixty one

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, John Pince Challacombe
being (a) a Doctor of Medicine of the University of Edinburgh
and being in actual practice as a (b) General Practitioner - (Regd.)
hereby certify, that I, on the Twenty Seventh day of February - 1861 - at (c)
No 7 ~~Ashley~~ James's St. - Ashley Road - Bristol in the County of
Somerset separately from any other Medical Practitioner,
personally examined (d) Elizabeth Cole - Gentlewoman of No 7 James's St. Ashley Road
Bristol and that
the said Elizabeth Cole is a (e)
of Unsound Mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f).
Great restlessness & agitation of manner - continually under the delusion that something dreadful is about to happen - acknowledges that she has an intimation to do mischief such as breaking the furniture.

2. Other facts (if any) indicating Insanity communicated to me by others (g).
Has begged for something with which to take away her life. Has used violence to others and been seen crawling about on hands & knees without any object in view.

Signed, Name, John Pince Challacombe Mo.

Place of Abode, 21. Stokes Croft

Dated this Twenty Seventh day of February

One Thousand Eight Hundred and Sixty One

Date back

(a) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) A. B. of——, insert residence and profession, or occupation (if any).
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Medical Superintendent,
The Retreat,
York.

No 999.
Elizabeth Cole

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

7

14. At what age was the patient first attacked with symptoms of insanity

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

a (a) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any) _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... _____

Dated, *this* *day of*

One Thousand Eight Hundred and Fifty

To _____

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length .. ..

Sex and Age .. ..

Married, Single, or Widowed .. ..

Condition of Life, and previous Occupation (if any) .. ..

Religious Persuasion, so far as known .. ..

Previous Place of Abode .. ..

Whether First Attack .. ..

Age (if known) on First Attack .. ..

When and where previously under Care and Treatment ..

Duration of existing Attack .. ..

Supposed Cause .. ..

Whether subject to Epilepsy .. ..

Whether Suicidal .. ..

Whether Dangerous to others .. ..

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

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

Signed, *Name,* (b) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any) or other circumstances of connexion with the Patient. _____

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

I, the undersigned Temple C. Paley

being a (c) Member of Royal College of Surgeons London

and being in actual practice as a (d) General Practitioner

hereby certify, that I, on the first day of March 1861 at (e) in the County of Minds Retreat N York separately from any other Medical Practitioner, personally examined (f) Elizabeth Cole Spinster of Rumer Street Ashley Road Bristol and that the said Elizabeth Cole is a (g) Person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Great depression of spirits and desire to die.

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

Signed, *Name,* Temple C. Paley

Place of Abode, 93 High Petergate York

Dated, this first day of March

One Thousand Eight Hundred and ~~Fifty~~ sixty one.

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, William Procter
being (a) member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the Fourth day of March at (c)
the Friends Retreat York in the County of
York separately from any other Medical Practitioner,
personally examined (d) Elizabeth Cole Spinster, 7 James St
Ashley Road - Bristol and that
the said Elizabeth Cole is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). She is melancholic, her spirits are depressed & her views of subjects somewhat with a original fact & memory & want of confidence in herself

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

Signed, *Name* William Procter

Place of Abode, 24 Ottogate - York

Dated this first day of March

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No 1000.
Maria L Town.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way conneeted with the Society of Friends? No

2. Where was the place of birth of the patient? 10 Bamswick Place, Leeds.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Most amiable, obedient and truthful; ordinary ability; somewhat slow & persevering.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Her education was commenced at home under a Governess, was continued in a first class day school, and completed at a Boarding School in the South. Her powers were not overtasked when very young.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Conduct good - Habits industrious.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Her Father was suddenly removed after 4 hours illness in July last.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Generally weak, & had no serious illness.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? We are not aware of any. except an Aunt on her Father's side who has been in the County Asylum upwards of thirty years. She married - very against her Father's will, went over to America and ill treated by her husband. Brought back by him to this Country.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? It is difficult to say; perhaps weakness of body combined with domestic affliction.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity. Between 19 & 20.

15. What has been the duration of the present attack? About 8 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Somewhat depressed a short time previous; and at times miserable: on the whole kept well.

19. What were the first decided symptoms of mental aberration? Loss of memory; selfreproach, and want of interest in anything and affection for friends

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. She is perfectly sane on many points. At the age of 10 she gave herself to the Saviour and united with the people of God, and has since led an exemplary and consistent life – she now maintains, that she does not love God and cannot pray.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Never refused food, though often takes very little. she has more than once said she was tired of life, and felt tempted to put an end to it, but did not as it would be wrong

23. What are the habits of the patient as regards personal cleanliness and decorum? Neat was orderly & modest

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. No; general weakness and bodily weakness.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Never was before

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? Change of air & scene, but with no benefit.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? It appears to be increasing, though more apparent at certain times than others.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Joseph Tod
10 Bromsgrove Place
Leeds

No 1000.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Maria Smith Town a (a) person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Maria Smith Town

Signed, *Name,* Joseph Town

Occupation (if any) Paper manufacturer

Place of Abode, 10 Brunswick Place Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Brother

Dated, *this* 21st *day of* March

One Thousand Eight Hundred ~~and Fifty~~ 61

To _____

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Maria Smith Town
Sex and Age	female aged 20
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	a Lady
Religious Persuasion, so far as known	Baptist
Previous Place of Abode	Leeds
Whether First Attack	Yes
Age (if known) on First Attack	Between 19 + 20
When and where previously under Care and Treatment ..	
Duration of existing Attack	6 months
Supposed Cause	General failure of health & domestic trouble
Whether subject to Epilepsy	no
Whether Suicidal	suspected
Whether Dangerous to others	not at all
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) Joseph Town

Occupation (if any), Paper manufacturer

Place of Abode, 10 Brunswick Place Leeds

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Brother

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

I, the undersigned William Procter being a (c) member of the College of Surgeons and being in actual practice as a (d) Surgeon hereby certify, that I, on the twenty second day of March at (e) the house of John Clarke Westerton Lowdon York in the County of York separately from any other Medical Practitioner, personally examined (f) Maria Smith Town Spinster of 10 Brunswick Place Leeds the said Maria Smith Town is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) She is melancholic, desponding & depressed, says that she is weary of life & has no regard for her friends

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

Signed, *Name,* William Procter

Place of Abode, 24 Petergate York

Dated, this twenty second day of March

One Thousand Eight Hundred and ~~Fifty~~ sixty one

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, Samuel William North
being (a) a Member of the Royal College of Surgeons in London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the twenty second day of March at (c)
the house of John Clarke Heslington Road near York in the County of
York separately from any other Medical Practitioner,
personally examined (d) Maria Smith Town of 10 Brunswick Place Leeds
Spinster and that
the said Maria Smith Town is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). A general state of disponding a desire to die and an entire indifference to all the duties of life

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

Signed, *Name,* Samuel Wm North

Place of Abode, 16 Castlegate York

Dated this twenty second day of March

One Thousand Eight Hundred and ~~Fifty~~ sixty one

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No 1001
Elizabeth T. Dewe

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
The paralysis has been coming on 5 or 6 years 1st in the right arm. Then the arm improved & the left became affected. The leg cannot be put to the ground.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Hearing voices & seeing people. excessive desire for stimulants. She lost her pushed 2 years ago in June. It was then taking ½ bottle of wine daily. She was then slightly paralysed. then drank excessively. & had Delirium Tremens.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

None to refuse food. but has thrown herself from a window 13 months ago. since then has not walked. but ~~has~~ was not greatly injured. Her mind varies. is probably getting worse.

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Emma Turley 2 Charlton Villas,
Camberwell. London.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

a (*) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any) _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... _____

Dated, *this* *day of*

One Thousand Eight Hundred and Fifty

To _____

Medical Superintendent of the Retreat, near York. *(For the Committer.)*

STATEMENT.

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

Name of Patient, with Christian Name at length .. ..

Sex and Age .. ..

Married, Single, or Widowed .. ..

Condition of Life, and previous Occupation (if any) .. ..

Religious Persuasion, so far as known .. ..

Previous Place of Abode .. ..

Whether First Attack .. ..

Age (if known) on First Attack .. ..

When and where previously under Care and Treatment ..

Duration of existing Attack .. ..

Supposed Cause .. ..

Whether subject to Epilepsy .. ..

Whether Suicidal .. ..

Whether Dangerous to others .. ..

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

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

Signed, *Name,* (*) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any) or other circumstances of connexion with the Patient. _____

MEDICAL CERTIFICATE—Sched. (A.) No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned

being a (*)

and being in actual practice as a (*)

hereby certify, that I, on the day of at (*)

in the County of

separately from any other Medical Practitioner,

personally examined (*) and that

the said is a (*)

and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*)

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

Signed, *Name,* _____

Place of Abode, _____

Dated, this day of

One Thousand Eight Hundred and Fifty

OBSERVE.—*It is required in signing the Medical Certificate, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, *or* apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of*——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

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

I, the undersigned,
being (a)
and being in actual practice as a (b)
hereby certify, that I, on the day of at (c)
in the County of
separately from any other Medical Practitioner,
personally examined (d)
and that
the said is a (e)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—
1. Facts indicating Insanity observed by myself (f).

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

Signed, *Name,*_____

*Place of Abode,*_____

Dated this day of
One Thousand Eight Hundred and Fifty

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of*——, *insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

№ 1001

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive
Mrs Elizabeth Talwin Teuve
a (a) Person of Unsound mind as a Patient into your (b) House
Subjoined is a Statement respecting the said Elizabeth Talwin Teuve

Signed, *Name,* Emma Turley

Occupation (if any),

Place of Abode, Gild Harbour Lane, Camberwell

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this Nineteenth Day of December
One Thousand Eight Hundred and Fifty Nine

To Mr George Stilwell
(c) Proprietor of (c) Licensed House Epsom

STATEMENT.

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

Name of Patient, with Christian Name at length	Elizabeth Talwin Teuve
Sex and Age	Female Six Months Three
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Wife of a Clergyman
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Weybread Suffolk
Whether First Attack	First attack last Sept
Age (if known) on First Attack	about 35
When and where previously under Care and Treatment	With Dr Graham in 42 and at York Retreat in 1845
Duration of existing Attack	Four Months
Supposed Cause	Loss of her Husband
Whether subject to Epilepsy	Not
Whether Suicidal	Not
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None

Signed, *Name,* (c) Emma Turley

Occupation (if any),

Place of Abode, Gild Harbour Lane

Degree of Relationship (if any) or other circumstances of connexion with the Patient Sister

(a) Lunatic, or an idiot, or a person of unsound mind.
(b) House or hospital.
(c) Proprietor or superintendent of.
(d) *Describing the house or hospital by situation and name, if any.*

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

Lunatics 1.
(16 & 17 Vict. c. 96.)
Private Patient.

London: Printed and Published by Shaw & Sons, Fetter Lane.

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

I, the undersigned, Robert Colbitt
being a (a) Doctor of Medicine of the University of Edinburgh and a Licentiate of the Apothecaries Company
and being in actual practice as a (b) Apothecary
hereby certify, that I, on the Seventeenth day of December at (c)
Brunswick Crescent, Camberwell in the County of
Surrey separately from any other Medical Practitioner,
personally examined (d) Mrs Elizabeth Jalium Deane of
Brunswick Crescent, Camberwell and that
the said Mrs Elizabeth Jalium Deane is a (e)
person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Great depression of Spirits, and especially on religious topics, says that she is eternally damned, hears voices, sometimes of the Devil. Thy father suggests that I ought to stop these Convulsions — then stimulants are prescribed, seems

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her friends state that her demands for stimulants are so great as not to be resisted — her mind that lately she has been bathing, and crying much —

Signed, Name, Robert Colbitt

Place of abode, Denmark Hill, Camberwell

Dated this Nineteenth day of December One Thousand Eight Hundred and Fifty Nine

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

I, the undersigned, George Burkle
being a (a) Doctor of Medicine, and a Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the Nineteenth day of December at (c) 1859
Brunswick Crescent, Camberwell in the County of
Surrey separately from any other Medical Practitioner,
personally examined (d) Mrs Elizabeth Jalium Deane of
Brunswick Crescent, Camberwell and that
the said Mrs Elizabeth Jalium Deane is a (e)
person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Numerous delusions — very frequently hears the voices of dead persons, and others — sometimes sees the faces of men, and the heads of animals &c

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

Signed, Name, George Burkle

Place of Abode, Denmark Hill Surrey

Dated this Nineteenth day of December One Thousand Eight Hundred and Fifty Nine

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*— Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

NOTICE OF ADMISSION.

Sched. (C.) Sect. 24.

(a) House or hospital.

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

I hereby give you Notice, That Mrs Elizabeth Talwin Dewe was admitted into this (a) House as a Private Patient, on the Nineteenth Day of December 1859 and I hereby transmit a Copy of the Order and Medical Certificate on which he was received (b).

Subjoined is a Statement with respect to the Mental and Bodily Condition of the above-named Patient.

(c) Superintendent or Proprietor of ——.

Signed, George Stilwell

(c) President Medical Proprietor

Church Street, Epsom

Dated this Twentieth Day of December

One Thousand Eight Hundred and Fifty Nine

To the _____

STATEMENT.

(d) *Some day not less than two clear days after the admission of the patient.*

I have this Day (d) seen and examined Elizabeth Talwin Dewe the Patient mentioned in the above Notice, and hereby Certify, that with respect to Mental State she is suffering from Monomania, complicated with Delirium Tremens

and that with respect to Bodily Health and Condition she is extremely thin and weak and only after consulting with the Medical Gentleman in attendance, did I consider it advisable to remove her from her lodgings under the care of her Sister, and myself. She bore the journey well

(e) Medical Proprietor, or Superintendent, or Attendant of ——

Signed, George Stilwell

(e) President Medical Proprietor

Dated this Twentieth Day of December

One Thousand Eight Hundred and Fifty Nine

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? by birthright

2. Where was the place of birth of the patient? York

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? no

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Ran a printer's apprentice. Anxiety.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Yes

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Has a Scrofulous Constitution. Severe Attack of Inflammation of the Bowels - Chronic Headache. Always under some anxiety for up.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Yes Her

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity

15. What has been the duration of the present attack?
Since the 8th inst decided - was exhibited for a [illegible] [illegible]

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
For a few days

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Violent

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Has refused food - but taken it better for 2 days.

23. What are the habits of the patient as regards personal cleanliness and decorum?
Spits - in other respects clean.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
Been at lodging under [illegible]

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
[illegible]

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

George Fatham
Leeds.

OBSERVE.—It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth IN FULL in the body of the Certificate.

Emily Tatham. 1002.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Emily Tatham a (*) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said Emily Tatham

Signed, *Name,* Maria Tatham

Occupation (if any) Widow

Place of Abode, Richmond Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated, *this* 19th day of Decr 1861.

One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

To John Ketchinson

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Emily Tatham
Sex and Age	female 26
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Society of Friends
Religious Persuasion, so far as known	Leeds
Previous Place of Abode	first
Whether First Attack	26
Age (if known) on First Attack	no
When and where previously under Care and Treatment	2 weeks
Duration of existing Attack	
Supposed Cause	no
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (*) George Tatham

Occupation (if any), Solicitors

Place of Abode, Leeds

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Uncle

OBSERVE.—*It is required in signing the Medical Certificate, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

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

I, the undersigned Samuel Wm Wyatt being a (*) Member of the Royal College of Surgeons London and being in actual practice as a (*) Surgeon hereby certify, that I, on the twenty fourth day of April one thousand eight hundred and sixty one at (*) the house No 9 Peaster in Bootham Lane (Office No 7 York) in the County of York separately from any other Medical Practitioner, personally examined (*) Emily Tatham of Richmond near Leeds Spinster and that the said Emily Tatham is a (*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*) Her manner & conversation both on entering the room & during the whole of the interview were incoherent & wild & she was unable to give any rational account of herself.

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

Signed, *Name,* Samuel Wm Wyatt

Place of Abode, 16 Castlegate York

Dated, this twenty fourth day of April 1861

One Thousand Eight Hundred and ~~Fifty~~ sixty one

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(†) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of——, insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

15

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

I, the undersigned, Edward Allen
being (a) Member of the Royal College of Surgeons, London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the 19th day of April 1861 at (c) Mrs Proctor, Burton Lane, York in the County of York separately from any other Medical Practitioner, personally examined (d) Emily Tatham, Ridgemount, near Leeds (Shirvela) and that the said Emily Tatham is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). She talks incessantly & quite incoherently. She says she is not in England, & never has been, that she is in Jewess &c

2. Other facts (if any) indicating Insanity communicated to me by others (g). Learn informed by Mrs Proctor, that she never ceases talking night or day & that if not nothing, she would injure both herself & others

Signed, Name, Edward Allen

Place of Abode, St Saviourgate York

Dated this 19th day of April

One Thousand Eight Hundred and ~~Fifty~~ Sixty-one

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

Mary A Stevens. No. 1003.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Yes, a Member

2. Where was the place of birth of the patient? West Ham Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Nothing particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
Friends School Croydon

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
Industrious & temperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
Fond of Animals & a garden

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
Losses & Breaking up of her home, mental Anxiety

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?
Not any

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
Yes, a Brother & Sister, the latter quite recovered.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
Anxiety of mind

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity 47.

15. What has been the duration of the present attack? 3 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

The sleep affected

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

That she is tempted by the Devil to take her own life, or that of some one else — that she may not eat — & many other delusions —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has refused food twice for 24 hours, & tried to strangle herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very clean & proper.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Not seriously indisposed — the skin in an unhealthy state — has had several boils. —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Rather more than 3 weeks in April 1861. — without any improvement — at Dr. Oxley's Hackney

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Tonics during some part of the time. not known what treatment while at Dr. Oxley's —

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Varies very much, not two days alike, one very excited — next, less so but very restless — the next very quiet, but refused food —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Ratcliffe & Barking Monthly Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

No 1003

I hereby certify that I have this day examined Mary Moline Stevens, aged 47 years. She informs me that she is under the power of the Devil, and that she is about to take the life of some person, and her own life also. She refuses to eat, because her life being about to be taken

16a

...tion and the Medical Certificates shall bear date not more than seven ...wo medical practitioners who sign the latter shall not be in partner... ...and unconnected with, as Father, Brother, Son or Partner, the ...t; and in like manner, unconnected with the Medical Superinten... ...en special circumstances prevent the patient's being examined by ...ceived upon one medical certificate; but in that case, two fresh ...ption.

Mary Moline Stevens

...a Patient into the Retreat.

Mary M. Stevens

Alf Horsnaill

Appraiser

Strood

Brother in Law

day of 4th Mo

(For the Committee.)

...EMENT.

...nt be not known, the Fact to be so stated.

..	Mary Moline Stevens
..	Female 47.
..	Single.
..	Schoolmistress.
..	Society of Friends
..	Stratford Green.
..	First attack
..	47.
..	Dr Oxley's April 1861.
..	Three months.
..	Pecuniary losses – breaking up of home
Whether subject to Epilepsy	No.
Whether Suicidal	Yes.
Whether Dangerous to others	Yes. Threatens others.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, Name, (b) Alf Horsnaill

Occupation (if any), Appraiser

Place of Abode, as above

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Do

OBSERVE.—It is required in signing the Medical Certificates, that the occupation of the patient, and the address of the House at which body of the Certificate.

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

I, the undersigned John Dan Brown being a (c) Doctor of Medicine and Member of the Royal College of Surgeons of England and being in actual practice as a (d) Surgeon hereby certify, that I, on the twenty sixth day of April 1861 at (e) the House of Mr Alfred Horsnaill Appraiser Strood in the County of Kent separately from any other Medical Practitioner, personally examined (f) Mary Moline Stevens of Stratford and that the said Mary Moline Stevens (in the County of Essex) is a (g) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Her statement to me that the Devil had appeared to her and ordered her to take her own life and that of some other person

2. Other facts (if any) indicating Insanity communicated to me by others (i). Her statement that she should be crushed if she travelled by a Railway

Signed, Name, John Dan Brown M.D.

Place of Abode, Rochester Kent

Dated, this twenty sixth day of April

One Thousand Eight Hundred and ~~Fifty~~ sixty one

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.
(c) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, as the case may be.
(e) Here insert the street and number of the house (if any), or other like particulars.
(f) A. B. of——, insert residence and profession, or occupation (if any).
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) Here state the facts.
(i) Here state the information, and from whom.

No 1003

I hereby certify that
I have this day exam-
-ined Mary Moline
Stevens, aged 47 years.
She informs me that
she is under the power of
the Devil, and that she
is about to take the life
of some person, and
her own life also.
She refuses to eat,
because her life
being about to be taken

16a

it is useless to
take food.
She is in my opinion
a dangerous Lunatic.

Rochester
April 26th 1861

J D Brown M.D.

No 1003
Mary M Stevens

This is to certify that Mary Moline Stevens aged 47 years is suffering from an aggravated form of Lunacy, highly dangerous to herself and others.

Her principal delusion is that she is under the power of Satan, who is instigating her to self destruction and also to take away the lives of others — The tatues no food as she is ordered not to do so and she says she is entirely under the control of the devil — I consider her to be a very proper person to be under confinement

Stephen Steele
Surgeon
Stroud

April 29th 1861

16(b)

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Moline Stevens a person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Mary M. Stevens

Signed, *Name,* Alf Horsnaill

Occupation (if any) Appraiser

Place of Abode, Thoo

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Brother in Law

Dated, this 29th day of 4th mo

One Thousand Eight Hundred and 61

To John Kitching

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Mary Moline Stevens
Sex and Age	Female 47.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Schoolmistress.
Religious Persuasion, so far as known	Society of Friends
Previous Place of Abode	Stratford Green.
Whether First Attack	First attack
Age (if known) on First Attack	47.
When and where previously under Care and Treatment ..	Fr Oxley's April 1861.
Duration of existing Attack	Three months.
Supposed Cause	Pecuniary losses—breaking up of home
Whether subject to Epilepsy	No.
Whether Suicidal	Yes.
Whether Dangerous to others	Yes. Threatens others.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) Alf Horsnaill

Occupation (if any), Appraiser

Place of Abode, as above

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Do

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

I, the undersigned John Dan Brown being a (c) Doctor of Medicine and Member of the Royal College of Surgeons of England and being in actual practice as a (d) Surgeon hereby certify, that I, on the twenty sixth day of April 1861 at (e) the House of Mr Alfred Horsnaill Appraiser Strood Kent in the County of separately from any other Medical Practitioner, personally examined (f) Mary Moline Stevens of Stratford (in the County of Essex) and that the said Mary Moline Stevens is a (g) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Her statement to me that the Devil had appeared to her and ordered her to take her own life and that of some other person

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

Her statement that she should be crushed if she travelled by a Railway

Signed, *Name,* John Dan Brown M.D.

Place of Abode, Rochester Kent

Dated, this twenty sixth day of April

One Thousand Eight Hundred and ~~Fifty~~ sixty one

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, Stephen Steele
being (a) a member of the Royal College of Surgeons England
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the 27th day of April 1861 at (c)
High Street Strood in the County of Kent
separately from any other Medical Practitioner,
personally examined (d) Mary Moline Stevens
and that
the said Mary Moline Stevens is a (e)
Lunatic and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (g). says that she is under the influence of the devil, who is instigating her to self destruction and also to take away the lives of others

2. Other facts (if any) indicating Insanity communicated to me by others (f). Statements from Mr. Alfred and Mrs. Flormaill to the like effect, regarding the influence of the devil over her and her actions.

Signed, *Name,* Stephen Steele M. R. C. S. England Surgeon.

Place of Abode, Strood Kent

Dated this 27th day of April 1861.

One Thousand Eight Hundred and ~~Fifty~~ Sixty One.

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Bearal,
York.

Sarah Booth.

1004

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mrs Sarah Booth of Castle St Luton Beds a (a) ~~person of unsound mind~~ as a Patient into the Retreat.

Subjoined is a Statement respecting the said Sarah Booth

Signed, *Name,* ~~Mrs Colcutt~~ Lydia Brown

Occupation (if any)

Place of Abode, 124 Park Street Luton

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... She was my Servant

Dated, *this* Eight *day of* 6th month

One Thousand Eight Hundred and ~~Fifty~~ Sixty One

To John Kitching M.D.

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Sarah Booth
Sex and Age	Female — Age 67
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Humble condition — Servant
Religious Persuasion, so far as known	Friend
Previous Place of Abode	Luton
Whether First Attack	Second attack
Age (if known) on First Attack	About 54
When and where previously under Care and Treatment ..	Not at any Asylum
Duration of existing Attack	Eighteen months
Supposed Cause	An accident
Whether subject to Epilepsy	No
Whether Suicidal	Threatens Suicide
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) Lydia Brown

Occupation (if any),

Place of Abode, 124 Park Street Luton

Degree of Relationship (if any) or other circumstances of connexion with the Patient. She was my Servant

MEDICAL CERTIFICATE—Sched. (A.) No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned Patrick Bruson being a (c) Member of the Royal College of Surgeons "England" & Licentiate of the Apothecary's Company and being in actual practice as a (d) Surgeon & Apothecary hereby certify, that I, on the Seventh day of June 1861 at (e) Castle Street Luton in the County of Bedford separately from any other Medical Practitioner, personally examined (f) Sarah Booth, "Servant" of ~~Castle St Luton~~ and that the said Sarah Booth is a (g) a person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

The House of Mrs Mary Cunningham 8 Castle Street Luton

1. Facts indicating Insanity observed by myself (h) Suffering from delusions & namely, that she has been a bad woman, that she fears being left alone, having frequently a strong impulse to commit suicide

2. Other facts (if any) indicating Insanity communicated to me by others (i). — That she has expressed a great fear "to be left alone" least she should throw herself out of the window

Signed, *Name,* Patrick Bruson

Place of Abode, Wellington Street Luton Bedfordshire

Dated, this 8th day of June

One Thousand Eight Hundred and ~~Fifty~~ Sixty One

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

19

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

I, the undersigned, Frederick J. Clarke
being (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the Seventh day of June at (c) the house of Miss Mary Cumberland No 8 Castle St Luton in the County of Bedford
Castle Street, Luton, Beds separately from any other Medical Practitioner,
personally examined (d) Sarah Booth of Castle Street Luton in the County of Bedford
and that
the said Sarah Booth is a (e)
a person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (g). - delusions concerning her moral state - her wickedness beyond the wickedness of all others - and her unfitness to live - morbid restlessness and irritability of temper, - threatening self destruction
2. Other facts (if any) indicating Insanity communicated to me by others (f).

Signed, *Name,* Fred J Clarke

Place of Abode, 2 Park Square Luton, Beds

Dated this Seventh day of June 1861.

One Thousand Eight Hundred ~~and Fifty~~ Sixty one

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

John Pitching Esq D.
Medical Superintendent,
The Retreat,
York.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?
Not in membership, nor connected by relationship, but an attender of Friends' Meetings.

2. Where was the place of birth of the patient? Godmanchester — Huntingdonshire.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? It is not known that there was.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? It is supposed that her character has always been marked by a restless activity, beyond this no peculiarity observable.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? No. Her literary instruction was limited & was received in a school established by a friend who maintained a teacher for the instruction of poor girls in elementary knowledge.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? She was brought up to domestic service & straw plaiting; her habits were always industrious temperate & regular.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. The patient is unmarried.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Not beyond the general characteristic of impatient restlessness in all her pursuits.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? The accident which brought on her present attack has always been considered by herself as a great reverse, having previously been able to earn a comfortable livelihood.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Not particularly subject to any kind of illness, except occasional attacks of erysipelas.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? There is probably such a predisposition inherited from her Father.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The only cause that can be assigned for the first attack was her looking to leave a comfortable situation, the present attack was brought on by a fall.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity - About the age of 54.

15. What has been the duration of the present attack? between twelve and eighteen months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? seized with extreme melancholy and dejection of mind about seven or eight years ago - this attack lasted some months.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? The intervals of sanity was complete & lasted some years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? The health was considerably affected - derangement of the digestive system especially -

19. What were the first decided symptoms of mental aberration? unfounded impressions about her worldly circumstances - and the disposition of her intimate friends and connections towards her

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. various subjects - but especially concerning the extreme weakness of her heart - and her having sinned beyond the reach of forgiveness.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? no

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? no

23. What are the habits of the patient as regards personal cleanliness and decorum? Orderly & decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. has had disorder of the digestive organs - and some months since an affection of the ~~bladder~~ bladder from which there was an hemorrhagic discharge for some days

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. ——

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? has taken tonic-aperients and from time to time anodynes to allay the irritation of the urinary organs.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? It seems to be stationary -

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Lydia Brown
124 Park Street
Sutton
Bedfordshire

No 1005.
Josiah L. Fox

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he ~~(or she)~~ in any way connected with the Society of Friends? Born a member. Disowned some years since solely on account of his non attendance of ~~them~~ Friends' Meetings

2. Where was the place of birth of the patient? Falmouth.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? In the mental only, as far as I am aware.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Decided peculiarity or eccentricity manifested by her habit of collecting and saving money even the most trifling articles. He appeared to be endowed with a less share of natural understanding than is common;

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Cultivated. I believe as much as his capacity rendered possible. Instruction in Latin and Mathematics first at a day-school in his native town, afterward at two Boarding Schools conducted by members of the Society of Friends

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
To that of a Farmer. I believe he was industrious, temperate & regular, but always slow in his actions and conceptions.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Never married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
Not to my knowledge. Such a strong bias to accumulation that he had nearly killed himself by starvation previously to his removal to lodgings

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
There has not

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Never.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? I am not aware of any.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? There is not; & the same answer applies to the latter part of the query.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? This is the first attack in which the symptoms were so unequivocal & judging from competent legal advice, as to prove him legally insane: but for several years I have considered him of ~~feeble~~ unsound mind

Joseph Fox.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? These unequivocal symptoms did not occur until he was in his 73rd year.

15. What has been the duration of the present attack? I believe about a fortnight.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? This is the first attack in which these unequivocal symptoms occurred, but he has long been incompetent to the care of his property. One proof of which is that in the year 1859 he had nearly lost some stock which he held in the Public Funds in consequence of his not taking up the Dividends.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? The information given in my former replies appears to render an answer to this unnecessary.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Not to my knowledge.

19. What were the first decided symptoms of mental aberration? As far as I know, his belief that Providence has mercifully enabled him to converse with myself and my Daughter, & his repeatedly putting questions to me as if I were within hearing & expressing a loud in the most excited manner the replies which he imagined I had made.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

His habits during the last 20 years that I have known him have always been very eccentric, but his delusion is now chiefly confined to one subject, viz. that of receiving supernatural communications from his friends at a distance. T.S.B.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? He is not, nor has he made any dangerous attacks upon the life of any person.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He has not.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very negligent as regards personal cleanliness.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Best answered by his present medical attendant. His bodily health is very good for his age, & considering that he persists in continually lying in bed. T.S.B.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. He has never been under care in any public or private asylum or Hospital.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Best answered by his present medical attendant. No special means have at present been used to remove his delusions. T.S.B.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Best answered by his present medical attendant. His disorder is stationary, & appears likely to be permanent. T.S.B.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joseph Fox, Surgeon, Falmouth, to whom they should be sent.

Joseph Fox

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Josiah Forster Fox
a (*) Lunatic, as a Patient into the Retreat.
Subjoined is a Statement respecting the said Lunatic.

Signed, *Name,* Joseph Fox,
Occupation (if any) Surgeon.
Place of Abode, Falmouth.
Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Brother.

Dated, *this* fifth *day of* 6th mo. 1861.
One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

To John Kitching M. D.
Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Josiah Forster Fox.
Sex and Age	Male. 73 on the 26th of 9th mo next.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Gentleman. He was formerly a Tanner Currier and Leather Seller.
Religious Persuasion, so far as known	By birth a Friend: disowned solely on the ground of his non-attendance of Friends' Meetings
Previous Place of Abode	Stratford upon Avon.
Whether First Attack	The first time that the symptoms were so unequivocal as to leave no doubt in any rational mind
Age (if known) on First Attack	To the best of my knowledge the above symptoms became
When and where previously under Care and Treatment ..	apparent about a fortnight ago. Not previously under care or treatment.
Duration of existing Attack	To the best of my knowledge about a fortnight.
Supposed Cause	Hereditary to my knowledge save an original defect in the organization of the brain which had rendered him very eccentric from infancy.
Whether subject to Epilepsy	He is not.
Whether Suicidal	He is not.
Whether Dangerous to others	He is not.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	He has not been so found.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	I know of none.

Signed, *Name,* (*) Joseph Fox
Occupation (if any), Surgeon
Place of Abode, Falmouth.
Degree of Relationship (if any) or other circumstances of connexion with the Patient.

MEDICAL CERTIFICATE—Sched. (A.) No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned T. S. Burrell Member of the Royal College of Surgeons of England,
being a (†) ~~Surgeon & Apothecary~~ Licentiate of the Society of Apothecaries London
and being in actual practice as a (†) General Practitioner
hereby certify, that I, on the fifth day of June 1861 at (†)
Warwick Shotford upon Avon in the County of Warwick
separately from any other Medical Practitioner, and that, I
personally examined (†) Josiah Forster Fox of Warwick Shotford upon Avon
the said Joseph Forster Fox is a (†)
Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (‡) He is excitable, conversies with his brother, & others relative to Lunacy, & Falmouth & yesterday to these there & police, which ended in his being taken home by force. Refuses food, & wishes me to take his life. Has been under restraint since the night & wishes me to take his life. Has been under restraint since the night & wishes me to take his life.
2. Other facts (if any) indicating Insanity communicated to me by others (‡) Suicidal to the Physician

Signed, *Name,* Thos. S. Burrell
Place of Abode, Shotford upon Avon

Dated, this fifth day of June
One Thousand Eight Hundred and ~~Fifty~~ Sixty One.

OBSERVE.—*It is required in signing the Medical Certificate, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth IN FULL in the body of the Certificate.*

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(§) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(†) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(†) Physician, surgeon, or apothecary, *as the case may be.*
(†) *Here insert the street and number of the house (if any), or other like particulars.*
(†) *A. B. of*——, *insert residence and profession, or occupation (if any).*
(†) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(‡) *Here state the facts.*
(‡) *Here state the information, and from whom.*

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

I, the undersigned, Bernard Rice
being (a) a Bachelor of Medicine of the University of London & a Member of the Royal College of Surgeons of England
and being in actual practice as a (b) general practitioner
hereby certify, that I, on the sixth day of June at (c)
11 Church Street, Stratford on Avon in the County of
Warwick separately from any other Medical Practitioner,
personally examined (d) Josiah Forster Fox of 11 Church Street, Stratford
on Avon, gentleman and that
the said Josiah Forster Fox is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

Lee Direction X

1. Facts indicating Insanity observed by myself (f). Senile dementia.
He informs me that he has had not a revelation but supernatural communication chiefly in the voice of his brother & niece, & in my presence asked a question & gave me their reply says the people next door complain of the voices disturbing them at night, &c.
2. Other facts (if any) indicating Insanity communicated to me by others (g).

Signed, Name, Bernard Rice
Place of Abode, Stratford on Avon.
Dated this sixth day of June
One Thousand Eight Hundred and ~~Fifty~~ sixty one.—

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).* X
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*



Dr. Hitchins
Medical Superintendent,
The Retreat,
York.

Wm. C. Horsnaill

1006.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Cleverly Horsnaill Junior a (a) person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said William C Horsnaill Junr.

Signed, *Name,* Louise Horsnaill

Occupation (if any)

Place of Abode, Strood Kent

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... ~~Brother~~ Mother

Dated, *this* 17th *day of* Ermonth

One Thousand Eight Hundred and ~~Fifty~~ Sixty One.

To John Ketching M.D.

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	William Cleverly Horsnaill Junior
Sex and Age	Male Twenty four
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Assistant in Corn Trade & Milling
Religious Persuasion, so far as known	Society of Friends
Previous Place of Abode	Strood Kent
Whether First Attack	First attack - at Cross back
Age (if known) on First Attack	—
When and where previously under Care and Treatment ..	—
Duration of existing Attack	Six months -
Supposed Cause	Perhaps Typhus fever Perhaps his occupation has been too desultory
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	- Left this neighbourhood some week ago

Signed, *Name,* (b) Frederic Wheeler

Occupation (if any), Gent

Place of Abode, Rochester

Degree of Relationship (if any) or other circumstances of connexion with the Patient. - First Cousin once removed - & has visited at my house - before leaving home

Patient is -

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

I, the undersigned William Procter being a (c) member of the College of Surgeons and being in actual practice as a (d) Surgeon hereby certify, that I, on the Nineteenth day of June at (e) the house of Francis Oxbaldwick in York in the County of York separately from any other Medical Practitioner, personally examined (f) William Cleverly Horsnaill Junr and that the said William Cleverly Horsnaill Junr is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Great depression of spirits & manner, with the idea that he has committed sins for which he cannot obtain forgiveness

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

Signed, *Name,* William Procter

Place of Abode, 24 Petergate - York

Dated, this Nineteenth day of June

One Thousand Eight Hundred and ~~Fifty~~ Sixty One.

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

23

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

I, the undersigned, Oswald Allen Moore
being (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the 19th day of June at (c) the house of Thomas Allis Esqr at Osbaldwick in York in the County of York separately from any other Medical Practitioner,
personally examined (d) William Clavely Horsnaill of Strond, in the County of Kent, Corn dealer and that
the said William Clavely Horsnaill is a (e) person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). Unusual depression of spirits and great anxiety about his religious condition, which has changed his general habits of life & rendered him listless and disinclined to any exertion. He states himself to have sought forgiveness and could not give me the least reason why he thought so.—

2. Other facts (if any) indicating Insanity communicated to me by others (g).
During the last few weeks he has at times been so devoid of energy as to have to be dressed. He would not occasionally take food, and at other times ~~at~~ immoderately, as related to me by Mr. Allis with whom he has been on a visit; who also states that he will frequently sit for hours in one position.

Signed, Name, Oswald A. Moore

Place of Abode, 15 Collingate, York

Dated this 19th day of June

One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*



YORK JUL 19 61

John Kitching Esqr.
Medical Superintendent,
The Retreat,
York.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Born in Membership

2. Where was the place of birth of the patient? Stood Kent

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Do not recollect any

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Agreable & gentle disposition nothing very peculiar in these respects not any unusual manifestation of mind

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No unusual attempt to bring out these qualities. He went to school with Maria Palmer Chatburn & D Pinson. Reading

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Has been employed in the Corn & Milling Business - Very temperate & regular - but rather wanting in application

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Riding Driving - and the care of Horses appeared to have a leading interest with him

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Not any

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Not any

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

Typhoid fever 6 years ago - Since which there has been loss of mental vigour

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

There have been cases

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The remote cause - The fever above named

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity

Between 23 and 24

15. What has been the duration of the present attack?

Six or eight months with fluctuations

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

None before this

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Spirits rather depressed and great want of energy

19. What were the first decided symptoms of mental aberration?

depression of mind and indisposition to move or act.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Paroxysms as above refusal to speak & eat – Morbid scrupulosity – and apprehension of demerit

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Not any

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Simply the refusal to eat from morbid apprehension of duty

23. What are the habits of the patient as regards personal cleanliness and decorum?

Scrupulously tidy & well behaved – & courteous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Tendency to dyspepsia

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

not at all

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Simple medical treatment of stomach disease & change of scene

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The paroxysms occur at irregular intervals and with increasing frequency

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

William Clenerly Horsnaill Strood Kent

Sarah Williamson

No. 1007.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Is a Member

2. Where was the place of birth of the patient? at Hull.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? When an infant had some affection of a spasmodic nature in the throat wh went off by itself.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Nothing peculiar but a little self willed.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Went to day schools. & then to Ackworth where she was upwds of two years.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
Since leaving school has been a Bonnet Maker. & has never been at liberty to take sufficient exercise.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Never been married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
Supposed to have had a disappointment just before her last attack.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?
Has had digestive disorder for years. always of a confined habit. Menstruation has ceased since the commencement of the present attack.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Yes

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

about Christmas, symptoms of unusual religious fervour.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Chiefly in religious reading to the interruption of her work. often silent & then incessant talking on religious subjects with a censorious tendency at others

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Has been excited & rather violent for a few days - with an anxiety to escape -

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Now & then. She is thought to have contemplated suicide -

23. What are the habits of the patient as regards personal cleanliness and decorum?

Nothing known to the contrary.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. No -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No -

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wm Williamson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Williamson a person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Sarah Williamson

Signed, *Name,* William Williamson

Occupation (if any) Carpenter

Place of Abode, 7 Colliergate York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Her Father

Dated, *this* 16th *day of* the 7th month 1861

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

To John Kitching M.D.

Medical Superintendent of the Retreat near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Sarah Williamson.
Sex and Age	Single aged 32.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Bonnet Maker.
Religious Persuasion, so far as known	Society of Friends
Previous Place of Abode	York
Whether First Attack	No a slight attack 6 years ago
Age (if known) on First Attack	26 years
When and where previously under Care and Treatment	No
Duration of existing Attack	Seven months.
Supposed Cause	
Whether subject to Epilepsy	No
Whether Suicidal	Doubtful.
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) William Williamson

Occupation (if any), Carpenter

Place of Abode, 7 Colliergate York

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Her Father

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

I, the undersigned Oswald A. Moore being a (c) M.R.C.S. England and being in actual practice as a (d) Surgeon hereby certify, that I, on the 16th day of July, 1861 at (e) 7 Colliergate, York in the County of York separately from any other Medical Practitioner, personally examined (f) Sarah Williamson of 7 Colliergate York, Bonnet Maker and that the said Sarah Williamson is a (f) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (g) — Speak incoherently — muttering to herself — and fancying she sees objects which are not present —

2. Other facts (if any) indicating Insanity communicated to me by others (h). Has had symptoms of speak with wandering about & trying to forget all the occurrences as relate to her Father —

Signed, *Name,* Oswd A. Moore

Place of Abode, 15 Colliergate York —

Dated, this 16th day of July

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—*Fellow of the Royal College of Physicians in London.
(d) *Physician, surgeon, or apothecary, as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) *Lunatic, or an insane person, or an idiot, or a person of unsound mind.*
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, Edward Allen
being (a) Surgeon Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the 16th day of July 1861 at (c)
The house of her father, No. 7. Collingate, York in the County of
York separately from any other Medical Practitioner,
personally examined (d) Sarah Williamson, Bonnet Maker Spinster of No 7 Collingate York
and that
the said Sarah Williamson is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). She talks incessantly & incoherently. She says she hears voices speaking to her,

2. Other facts (if any) indicating Insanity communicated to me by others (g). I am informed by her father that she has been much dissipated in her mind for six months past thinking that she was lost, & that her soul could not be saved

Signed, Name, Edward Allen

Place of Abode, 19 St. Saviourgate York

Dated this 16th day of July

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

1008.

Whereas We did by Warrant under Our Royal Sign Manual bearing date the 19th day of January 1861 order and direct that William Edmunds who was at a Sessions [illegible] at the Central Criminal Court [illegible] 7th day of January 1861 Indicted [illegible] Arson, and was found by a Jury duly taken in that behalf to be Insane, should be removed to the Criminal Lunatic Asylum in St George's Fields in the County of Surrey And Whereas humble suit has been made unto Us to be Graciously pleased to order the said William Edmunds to be removed from the said Criminal Lunatic Asylum to the "Friends Retreat" at York in the County of York. We taking the Premises into

44148
Warrant for the reception of William Edmunds in the "Friends Retreat" at York in the County of York.

27

into Our Royal Consideration do by Virtue of the Act of Parliament made and passed in the 39th. and 40th. Years of the Reign of King George the Third, hereby signify Our Pleasure that you do receive the said William Edmunds from the said Criminal Lunatic Asylum in St. George's Fields in the County of Surrey, and keep him in custody in the said "Friends Retreat" at York in the County of York, until Our further Pleasure shall be known.

And for so doing this shall be your Warrant. Given at Our Court at St. James's the 18th. day of July 1861 in the twenty fifth Year of Our Reign.

To Our Trusty and Wellbeloved
The Superintendent of the
"Friends Retreat" at York,
in the County of York, and
all others whom it may
concern.

By Her Majesty's
Command.
G. Lewis

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Majesty's
mand.
Lewis

Warrant for the reception
of William Edmunds in
the "Friends Retreat" at
York, in the County
of York, and all others
whom it may concern

No 1008.

Wm Edmunds

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? He is a member by birthright

2. Where was the place of birth of the patient? Tottenham, Middlesex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? He manifested nothing peculiar, but was very active, studious & very fond of reading.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Very sensitive, but taciturn good intellectual capacity, but not greater than is common & not precocious.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He received fully an average attention in early life at home & at a day School, to the age of 9 years, from 9 to 13½ years, he was a pupil of the Croydon School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? He was apprenticed to his Father as a Tailor, and was always industrious, temperate & regular in conduct both in youth & in adult age.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. He married in 1851. & has 3 Children living, the eldest about 6 years, the youngest three months, had his eldest Child lived he would have now been about 9 years of age.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? He was very fond of drawing in his youth, & in his business as a Tailor, has manifested great skill as a cutter out, & is very successful in this department of his business.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? His business is a very increasing one, which circumstance has occasioned great anxiety.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? A doubt exists respecting the first query, no relative has ever been insane.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The first attack was induced by constipation produced by very close application to business & voluntary midnight reading. The last attack arose from anxiety consequent on his business

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Twenty years.

15. What has been the duration of the present attack? six months & half - but was in a desponding state some time previous.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? The malady has occurred thrice, the first attack lasted 2 or 3 months, the second 17 days which were spent at Bethel House, London, the third is the present attack which has lasted about 6 months, about 5 months of this time has been spent in Bethlehem Hospital.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? Complete.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? The return of insanity is generally preceded by depression & at times loss of sleep & starting in sleep.

19. What were the first decided symptoms of mental aberration? religious excitement with ideas of having acted against divine guidance by reading the ordinary periodical publications of the day, perfectly harmless & the first attack passed away without being placed in an asylum.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. no very decided delusions, but he manifests considerable nervous excitement & a tendency to overrate his success in business, the excitement is manifested on no particular point.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? When under great depression he has spoken of self destruction, has never been in any way dangerous to others.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? never refused his food, nor has he ever injured himself.

23. What are the habits of the patient as regards personal cleanliness and decorum? good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. he is at this moment more than usual full health with increased redness about the head & face, but this has probably arisen from want of exercise.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. see No. 16.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? Only the most simple medical treatment & with good effect.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? for the whole time he has been in Bethlehem Hospital his state appears stationary, he is to all appearances perfectly sensible.

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27 Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive a (*) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any) _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... _____

Dated, *this* *day of*

One Thousand Eight Hundred and Fifty

To John Kitching M.D.

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

STATEMENT.

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

Name of Patient, with Christian Name at length .. ..

Sex and Age .. ..

Married, Single, or Widowed .. ..

Condition of Life, and previous Occupation (if any) .. ..

Religious Persuasion, so far as known .. ..

Previous Place of Abode .. ..

Whether First Attack .. ..

Age (if known) on First Attack .. ..

When and where previously under Care and Treatment ..

Duration of existing Attack .. ..

Supposed Cause .. ..

Whether subject to Epilepsy .. ..

Whether Suicidal .. ..

Whether Dangerous to others .. ..

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

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

Signed, *Name,* (*) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any) or other circumstances of connexion with the Patient. _____

MEDICAL CERTIFICATE—Sched. (A.) No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned

being a (*)

and being in actual practice as a (*)

hereby certify, that I, on the day of at (*)

in the County of

separately from any other Medical Practitioner,

personally examined (*) and that

the said is a (*)

and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*)

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

Signed, *Name,* _____

Place of Abode, _____

Dated, this day of

One Thousand Eight Hundred and Fifty

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of*——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

MEDICAL CERTIFICATE—Sched. (A) No. 2, Sects. 4, 5, 6, 10, 11, 12, 13.

I, the undersigned,
being (a)
and being in actual practice as a (b)
hereby certify, that I, on the day of at (c)
in the County of
separately from any other Medical Practitioner,
personally examined (d)
and that
the said is a (e)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—
1. Facts indicating Insanity observed by myself (f).

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

Signed, *Name,*

Place of Abode,

Dated this day of
One Thousand Eight Hundred and Fifty

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) *Physician, surgeon, or apothecary, as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) *Lunatic, or an idiot, or a person of unsound mind.*
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

1008.

44148

Whitehall,

18 July 1861

Sir,

In transmitting to you the accompanying Warrant for the reception of William Edmunds into the "Friends Retreat" at York.

I am directed by the Secretary of State for the Home Department to request that it may be distinctly understood that the cost of this person's maintenance therein will not be defrayed by the Government.

I am,

Sir,

Your obedient Servant,

The Superintendent of the Friends Retreat at York.

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1008.

Copy of Memorial presented to the Home Secretary by Charles Gilpin M.P.

To the Rt. Hon Sir, G. C. Lewis, Secretary of State for the Home Department &c

The memorial of the undersigned on behalf of William Edmunds of Devonshire St Peckham Rye Tailor now confined in Bethlehem Hospital

Respectfully Sheweth.

That the said Wm Edmunds in the month of Jan.y was tried up on a charge of setting fire to a hayrick & acquitted on the ground of Insanity.

That the charge rested upon a voluntary statement made by the said Wm Edmunds whilst he was suffering under an attack of nervous debility, but that no proof was adduced that he committed the act question

That the said W. Edmunds is a member of the Society of Friends & your memorialists earnestly pray that he may be allowed to be removed from Bethlehem Hospital where he is now confined to the Friends Retreat a York. Your memorialists make this request in the belief that it will lessen the painful circumstances of his present condition & greatly conduce to the restoration of his mental & physical health

Signed by the wife Parents, Brother & Sister of W. Edmunds

The undersigned beg respectfully to support the foregoing memorial, They have known the said W. Edmunds Sen for many years as a respectable & industrious tradesman of quiet & inoffensive manners & deeply commiserating him & his family in this unlooked for calamity they sincerely trust the case may claim the kind consideration of the Home Secretary.

Thos Norton
Jos Sterry
John Taylor
Edward Paull
Richard Barlett
Joseph Taylor
Wm Cash

(44148)

(Reply)

Whitehall
29th June 1801

Sir,

Secretary Sir George Lewis having had before him the memorial in behalf of Wm Edmunds to which your name is attached, I am directed to acquaint you that he has no objection to authorise the removal of Edmunds from Bethlem Hospital to the Friends Retreat at York on receiving an assurance that the authorities of that Asylum are willing to receive him & that the cost of his maintenance will be duly provided for by his friends

I am Sir Yr. Obedt. Servt.
W. Waddington

Thos Norton Esq

No: 1009.

Sophia Tite.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Born a member of the Society of Friends, but lost her membership by marrying out.

2. Where was the place of birth of the patient?

Chipping Norton, Oxon.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not that I know of.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

No marked distinction of any kind.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She has been at Ackworth and the rest of her education was at home under the superintendence of her Father.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

She was industrious & Correct especially in Ornamental needle-work and arithmetic & particularly temperate in her habits.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married at 28 her eldest Child 46 and her youngest 32 she has had six children only two alive.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Not like the present time when the death of her husband Caused her & the care of her widowed daughter.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

Not that I am aware of.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Not that I ever heard of.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Not able to say.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity

It came gradually on, commencing about her 67 year

15. What has been the duration of the present attack?

Continued imbecility since 1860

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

—

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

—

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

Loss of Memory

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She can give no perfect answer to any question and can remember no names ale persons being alike to her

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

None

23. What are the habits of the patient as regards personal cleanliness and decorum?

She is unable to wash or take care of herself

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Quite well in bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has not left her home before since her imbecility manifested itself

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Nothing the case being considered hopeless

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

She becomes gradually more imbecile

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr. Dalby of Coleshill Warwickshire
daughter of the patient

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sophia Tite
a (a) person of unsound mind, as a Patient into the Retreat.
Subjoined is a Statement respecting the said Sophia Tite

Signed, *Name,* Mary Sophia Dalby
Occupation (if any) Bookseller
Place of Abode, Coleshill
Degree of Relationship (if any), or other circumstances of connexion with the Patient Widowed Daughter of Patient

Dated, *this* Second *day of* September
One Thousand Eight Hundred and ~~Fifty~~ Sixty one

To John Kitchiney M.D.
Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Sophia Tite
Sex and Age	female 78 last January
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	no occupation
Religious Persuasion, so far as known	Since her marriage, the Church of Engd
Previous Place of Abode	Coleshill Warwickshire
Whether First Attack	one continued attack of imbecility
Age (if known) on First Attack	67
When and where previously under Care and Treatment	only at Home
Duration of existing Attack	eleven years
Supposed Cause	cannot say
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) Mary Sophia Dalby
Occupation (if any), Bookseller
Place of Abode, Coleshill
Degree of Relationship (if any) or other circumstances of connexion with the Patient. Daughter of the Patient

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

I, the undersigned John Davies
being a (c) a Doctor of Medicine University and King's College Aberdeen
and being in actual practice as a (d) Physician at Coleshill
hereby certify, that I, on the Second day of September at (e) the House of Zer Cite Husband on the Hyt Street Coleshill in the County of Warwick separately from any other Medical Practitioner, personally examined (f) Sophia Tite and that the said Sophia Tite Widow of the Cite Wm Tite Manager of the Bank is a (g) ~~Person of Unsound~~ Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h) Want of Memory and not Knowing Persons and Incapable of Taking care of Herself
2. Other facts (if any) indicating Insanity communicated to me by others (i). Not Knowing Persons

Signed, *Name,* Davies M.D.
Place of Abode, Coleshill Warwickshire

Dated, this Second day of Septr
One Thousand Eight Hundred and ~~Fifty~~ Sixty one

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth* IN FULL *in the body of the Certificate.*

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, John Henry Trollope Bailey
being (a) a Member of the Royal College of Surgeons of England & a Licent. of Apoth. Co. London
and being in actual practice as a (b) General Practitioner of Med. & Surgery
hereby certify, that I, on the 2nd day of September at (c)
the house of her late husband, High Street Colehill — in the County of
~~Colehill~~ Warwickshire separately from any other Medical Practitioner,
personally examined (d) Sophia Tite of Coleshire
widow of the late William Tite Manager of Branch Bank and that
the said Sophia Tite is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). Says the breakfasted in the roof of the opposite house this morning, and to every question put to her answers most incoherently, says she had her dinner when she has not &c &c—

2. Other facts (if any) indicating Insanity communicated to me by others (g). Does not know the difference in value between a shilling & a sovereign. Calls almost every one who sees her by her servants name "Sally" — These facts communicated by her servant Sarah Johnson

Signed, Name, John Henry Trollope Bailey

Place of Abode, Colehill

Dated this — 2nd day of September

One Thousand Eight Hundred and ~~Fifty~~ Sixty One —

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of——, insert residence and profession, or occupation (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No ~~1009~~. 1010

James A Wigham

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright, or otherwise, or is he (or she) in any way connected with the Society of Friends? He is a member by Birthright.

2. Where was the place of birth of the patient? Edinburgh.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? nothing peculiar during Infancy. but had Teething convulsions in Childhood.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? during youth he was decidedly deficient in natural understanding.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He was kindly and carefully trained at home, but he was incapable of literary instruction.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? No occupation His habits he being formed and directed by his attendent.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. not Married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Was not.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Not.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Teething convulsions.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Until he had Teething Convulsions He was a bright and vigorous Child.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not any Hereditary predisposition – No near relation has ever been Insane.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Teething convulsions the cause of the first and continued mental disorder.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Between one and Two years.

15. What has been the duration of the present attack? Twenty years.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? ———

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? ———

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? ———

19. What were the first decided symptoms of mental aberration? Incapability to express his wants by Language and an arrest of mental developement.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. nothing particular to state.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Is not Homocidal, but when irritated prone to slight acts of destruction.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Not any.

23. What are the habits of the patient as regards personal cleanliness and decorum? Correct.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. In good health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. ———

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? Has had much Medical advice but without effect.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Not much if any change in the disorder, but manifest improvement in general conduct, from judicious training.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? His Parents John or Sarah Wigham 10 Salisbury Road Edenburgh.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Anthony Wigham
a (*) Person of unsound mind, as a Patient into the Retreat.
Subjoined is a Statement respecting the said James Anthony Wigham

Signed, *Name,* John Wigham

Occupation (if any) Not any.

Place of abode, 10 Salisbury Road Edinburgh.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father.

Name of Patient, with Christian Name at length ..... James Anthony Wigham.

Sex and Age ..... Male, 22 years.

Married, Single, or Widowed ..... Single.

Condition of Life, and previous Occupation (if any) ..... Gentleman – no occupation.

Religious Persuasion, so far as known ..... A member of the Society of Friends.

Previous Place of Abode ..... 10 Salisbury Road Edinburgh.

Whether First Attack ..... First –

Age (if known) on First Attack ..... About one year

When and where previously under Care and Treatment ..... At home.

Duration of existing Attack ..... 20 years.

Supposed Cause ..... Teething convulsions

Whether subject to Epilepsy ..... No

Whether Suicidal ..... Not

Whether Dangerous to others ..... Not.

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... Not.

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

Signed, *Name,* (*) John Wigham.

Dated, this 23 day – day of of Ninth Month (September) 1861
One Thousand Eight Hundred and Fifty

To John Kitching M.D.
Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned James Dinholm Pridie
being a (*) Member of the Royal College of Surgeons of England
and being in actual practice as a (*) Surgeon
hereby certify, that I, on the twenty third day of September 1861 at (*) 10 Salisbury Road Edinburgh in the County of Edinburgh separately from any other Medical Practitioner, personally examined (*) James Anthony Wigham of 10 Salisbury Road Edinburgh and that the said James Anthony Wigham gentleman is a (*) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). The absence of control over his actions and violence during my visit – his incoherent conversation.

2. Other facts (if any) indicating insanity communicated to me by others (*). Violence towards those about him communicated by his attendant.

Signed, *Name,* James D. Pridie, M.R.C.S. Eng. F.L. & H.L.S. Edin. 1841.

Place of Abode, 29 South Clerk Street Edinburgh.

Dated, this twenty third day of September
One Thousand Eight Hundred and ~~Sixty~~ Sixty One Years.

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, as the case may be.
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of ——, insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

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

I, the undersigned, William Stephenson
being a (a) graduate of the University of Edinburgh
and being in actual practice as a (b) Physician
hereby certify, that I, on the Twenty third day of Septr 1861 — at (c)
10 Salisbury Road Edinburgh in the County of
Edinburgh separately from any other Medical Practitioner,
personally examined (d) James Anthony Wigham of 10 Salisbury Road Edinburgh
Gentleman and that
the said James Anthony Wigham is a (e)
Lunatic — and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). Incapability of holding any conversation or of expressing thought. His conduct childish & uncontrolled manifesting greating want of development of mind —
2. Other facts (if any) indicating Insanity communicated to me by others (g).
when not properly treated apt to be violent and prone to destructive habits — communicated by parents —

Signed, *Name,* William Stephenson M.D. L.R.C.S.E.

Place of Abode, Grange Villa

Dated this Twenty third day of September

One Thousand Eight Hundred and ~~Fifty~~ Sixty one —

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No 1011. No 2
Joseph Weatherall

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Member by birthright. not now a member —

2. Where was the place of birth of the patient?

Crathorne. Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing remarkable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

At no public school. Education at home & neighbourhood

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Grocer habits through life industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Thirty Five when Married. & his first wife by whom he had one child (daughter) died aged 30 2 years ago

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Serious pecuniary losses and domestic affliction

10. Was the patient ever afflicted with epilectic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

See answer to quest 9

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

38

14. At what age was the patient first attacked with symptoms of insanity?

about 68

15. What has been the duration of the present attack?

Twelve to Eighteen Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Want of Sleep and General debilitation

19. What were the first decided symptoms of mental aberration?

Undue self reproach and candidate fear of arrest

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

See reply to Ques 19

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Proper

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Medical attendance

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Lucid intervals - disorder rather increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wm Bennington or John Godson
Stockton on Tees

William Robson
Stockton on Tees

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Joseph Weatherall
a (a) person of unsound mind, as a Patient into the Retreat.
Subjoined is a Statement respecting the said Joseph Weatherall

Signed, *Name,* William Robson

Occupation (if any)

Place of abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Intimate Friend

Name of Patient, with Christian Name at length	Joseph Weatherall
Sex and Age	Sixty nine
Married, Single, or Widowed	~~Widowed~~ Married
Condition of Life, and previous Occupation (if any)	Formerly Grocer
Religious Persuasion, so far as known	"Friend"
Previous Place of Abode	Stockton on Tees. (now Great Ayton)
Whether First Attack	Yes
Age (if known) on First Attack	about 67 or 68
When and where previously under Care and Treatment ..	Care of his wife
Duration of existing Attack	
Supposed Cause	pecuniary losses & domestic affliction Wife of Daughter
Whether subject to Epilepsy	No
Whether Suicidal	
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) Samuel Hare Accountant Darlington

Dated, this second day of Tenth Month

One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

To John Kitching M.D.
Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned John Rimington Fotheryill
being a (c) Licentiate of the College of Surgeons of Edinburgh
and being in actual practice as a (d) Surgeon
hereby certify, that I, on the second day of October 1861 at (e)
High North Lenace ~~in the County~~ Darlington in the County of
Durham separately from any other Medical Practitioner,
personally examined (f) Joseph Weatherall ~~[illegible]~~ of Great Ayton Grocer and that
the said Joseph Weatherall is a (g)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h). In coherence and great nervousness and a constant fear of being arrested. He thinks almost every one he sees is watching him for that purpose, although it appears there is no ground for such apprehension.
2. Other facts (if any) indicating insanity communicated to me by others (i).
I was told similar facts to the above by his wife and Mr Samuel Hare

Signed, *Name,* John R. Fotheryill

Place of Abode, Darlington

Dated, this second day of October

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of ——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

MEDICAL CERTIFICATE—Sched. A No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned, Lawson Fleck Gummery
being a (a) Member of the Royal College of Surgeons and Licentiate of Apoth. Hall London
and being in actual practice as a (b) Surgeon and Apothecary
hereby certify, that I, on the thirteenth day of June 1861 at (c) Great Ayton in Cleveland in the County of York
personally examined (d) Joseph Weatherall separately from any other Medical Practitioner,
and that
the said Joseph Weatherall was a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) perfect mental hallucination on pecuniary matters — great waywardness — irregular muscular actions — &c — physiognomy of insanity complete

2. Other facts (if any) indicating Insanity communicated to me by others (g).
Many circumstances related by his friends

+ I have seen him since at intervals — not to speak to him — but my opinion is the same

Signed, Name, L Gummery
Place of Abode, Northgate Darlington

Dated this third day of October 1861

One Thousand Eight Hundred and Fifty

(a) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) A. B. of ——, insert residence and profession, or occupation, (if any).
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Medical Superintendent,
The Retreat,
York.

No 1011.
Joseph Weatherall.

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

I, the undersigned, Oswald A. Moore
being a (*) M.R.C.S. Eng
and being in actual practice as a (*) Surgeon
hereby certify, that I, on the third day of October at (*)
the house of John Clark, Gardener, Hollington Road in the County of York
separately from any other Medical Practitioner,
personally examined (*) Joseph Weatherall of Heslington, Yorker
and that
the said Joseph Weatherall is a (*)
person of unsound mind and a proper Person to be taken charge of and detained under
care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*), Great depression of spirits, accompanied with an unwillingness & inability to continue any fixed subject of conversation. This listlessness arising of the power of attention renders him unfit for the ordinary duties of life.

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

His keepers informed me that he was in constant apprehension of being taken up, & that this was not with any good reason at present

Signed, Name, Oswald A. Moore
Place of Abode, 15 Collingate, York
Dated this 3rd day of October
One Thousand Eight Hundred and ~~Fifty~~ Sixty one

(*) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
Physician, surgeon, or apothecary, as the case may be.
Insert the street and number of the house (if any), or other like
(*) A. B. of ——, insert residence and profession, or occupation, (if any).
(*) Lunatic, or an idiot, or a person of unsound mind.
(*) Here state the facts.
(*) Here state the information, and from whom.

Medical Superintendent,
The Retreat,
York.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive a (*) _____, as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any) _____

Place of abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Name of Patient, with Christian Name at length .. ..

Sex and Age .. ..

Married, Single, or Widowed .. ..

Condition of Life, and previous Occupation (if any) .. ..

Religious Persuasion, so far as known .. ..

Previous Place of Abode .. ..

Whether First Attack .. ..

Age (if known) on First Attack .. ..

When and where previously under Care and Treatment ..

Duration of existing Attack .. ..

Supposed Cause .. ..

Whether subject to Epilepsy .. ..

Whether Suicidal .. ..

Whether Dangerous to others .. ..

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

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

Signed, *Name,* (*) _____

Dated, this _____ day of _____

One Thousand Eight Hundred and Fifty

To _____

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

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

I, the undersigned Samuel William Wroth

being a (†) Member of the Royal College of Surgeons in London

and being in actual practice as a (*) Surgeon

hereby certify, that I, on the third day of October at (*) 18 Castlegate in the County of York

personally examined (‡) the said Joseph Weatherell of Great Ayton Moor separately from any other Medical Practitioner, and that

Joseph Weatherell is a (§) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (¶). He is notably ~~can~~ with difficulty be kept in one train of conversation jumping from one subject to another. He is much disordered in his clothing complains of very noisy bad smells & shuts his ears to the contents of passing himself.

2. ~~Other facts (if any) indicating insanity communicated to me by others (**).~~ Said conduct and manner are to me indicative of insanity preventing him expressing his wishes & warnings of his state not drawing comfort and effecting his cure & dressing & destroying himself.

Signed, *Name,* Samuel Wm Wroth

Place of Abode, 18 Castlegate York

Dated, this third day of October

One Thousand Eight Hundred and ~~Fifty~~ sixty one

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(†) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(‡) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(§) Physician, surgeon, or apothecary, *as the case may be.*
(¶) *Here insert the street and number of the house (if any), or other like particulars.*
(**) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Here state the facts.*
(c) *Here state the information, and from whom.*

No 1012.

Isabella Sharpe

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Her maternal Aunt was at times liable to depressions—

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

For several years these attacks have manifested themselves without any assignable cause.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity

Manifestly about the age of 17 —

15. What has been the duration of the present attack?

She has never been thoroughly well since her removal from the Retreat

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

While labouring under mental aberration for some years the attacks have come on at various intervals some times characterised by extreme depression at others by great irritability

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

The intervals have been of considerable duration but never complete

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She has been subject to violent paroxysms of temper apparently from trifling causes — Her mind appears much affected by religious subjects & she also labours under a great delusion as to eating & drinking —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Negligent —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In fair bodily health —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

In the Retreat at York 1846-8

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

See answer to 25 —

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder has manifestly increased within the last six months — The changes have occurred at uncertain times & not at stated periods —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Isaac Sharp
Middlesbro

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Isabella Sharp
a (*) person of unsound mind, as a Patient into the Retreat.
Subjoined is a Statement respecting the said Isabella Sharp

Signed, *Name,* Isaac Sharp
Occupation (if any) Cane Agent
Place of Abode, Middlesbro
Degree of Relationship (if any), or other circumstances of connexion with the Patient Half Brother

Dated, *this* 27th *day of* November 1861
One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

To John Kitching, M.D.
Medical Superintendent of the Retreat, near York. *(For the Committee.)*

STATEMENT.

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

Name of Patient, with Christian Name at length	Isabella Sharp
Sex and Age	Female – aged 34 last month.
Married, Single, or Widowed	Single –
Condition of Life, and previous Occupation (if any)	No occupation
Religious Persuasion, so far as known	Member of the Society of Friends
Previous Place of Abode	Reading
Whether First Attack	Yes
Age (if known) on First Attack	About 17
When and where previously under Care and Treatment	The Retreat
Duration of existing Attack	13 years (at intervals)
Supposed Cause	Intemperance
Whether subject to Epilepsy	On one occasion. Suffered about 3 yrs ago.
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	—

Signed, *Name,* (*) Isaac Sharp
Occupation (if any),
Place of Abode,
Degree of Relationship (if any) or other circumstances of connexion with the Patient.

MEDICAL CERTIFICATE—Sched. (A.) No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned William Hill Evans
being a (*) Doctor of Medicine of the University of Dublin
and being in actual practice as a (*) Physician & Surgeon
hereby certify, that I, on the twenty-ninth day of November 1861 at (*)
40 Salem Place - Bradford in the County of
York separately from any other Medical Practitioner, this day
personally examined (*) Isabella Sharp of 40 Salem Pl Bradford and that
the said Isabella Sharp is a (*)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*)
Strange conversations - and odd manner of talking
lapse of delusions & wrong associations - also the peculiar
unsteady appearance of the countenance, particularly the eye
2. Other facts (if any) indicating Insanity communicated to me by others (*).
She has acted in her near relations in a violent manner
she has struck her sister, & used very intemperate language
attempted to strike her sister, & used very intemperate language

Signed, *Name,* William Hill Evans
Place of Abode, 38 Little Horton Lane - Bradford Yorks

Dated, this twenty ninth day of November
One Thousand Eight Hundred and ~~Fifty~~ Sixty one.

OBSERVE.—*It is required in signing the Medical Certificates, that the qualification of the Medical Practitioner, the residence and occupation of the patient, and the address of the House at which the examination is made, should be set forth IN FULL in the body of the Certificate.*

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of——, insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

MEDICAL CERTIFICATE—Sched. (A) No. 2, Sects. 4, 5, 6, 10, 11, 12, 13.

I, the undersigned, Patrick Augustus Brady M.D.
being (a) a Doctor of Medicine of the University of Aberdeen
and being in actual practice as a (b) Physician and Surgeon
hereby certify, that I, on the Twenty Seventh day of Nov. 1861 at (c)
40 Salem Street Bradford Yorks. in the County of
personally examined (d) Isabella Sharpe of 40 Salem St Bradford separately from any other Medical Practitioner,
the said Isabella Sharpe is a person of unsound mind and that
is a (e) and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). The general expression of the countenance indicates unsoundness of mind ~~[illegible]~~

2. Other facts (if any) indicating Insanity communicated to me by ~~others~~ her brother (g). Occasional fits of violence language being used of a very gross character. Misapplication of religious texts. And shaying away for miles, without the knowledge of her friends &c

x which was further indicated by her general appearance and rapid utterance

Signed, Name, P A Brady M.D.

Place of Abode, 4 Manor Row Bradford

P A Brady M.D. Dated this 27th day of November

One Thousand Eight Hundred and ~~Fifty~~ Sixty one

(a) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) A. B. of——, insert residence and profession, or occupation (if any).
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

John Kitching M.D.
Medical Superintendent,
The Retreat,
York.

No 1013. Sarah Sanderson.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Sanderson a (*) Person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Sarah Sanderson

Signed, *Name,* Henry Kipsley

Occupation (if any) Tea Dealer

Place of abode, Severns Place in York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Name of Patient, with Christian Name at length	Sarah Sanderson
Sex and Age	Female. – Age 43 years & 9 mos
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Daughter of a Merchant
Religious Persuasion, so far as known	Society of Friends
Previous Place of Abode	York
Whether First Attack	Not the first attack
Age (if known) on First Attack	Supposed about 19
When and where previously under Care and Treatment	Not under previous care
Duration of existing Attack	About three weeks
Supposed Cause	No assignable cause except Slight over exertion & excitement
Whether subject to Epilepsy	Not
Whether Suicidal	Suppose so
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (*) Henry Kipsley

Dated, this twenty third day of Twelfth month One Thousand Eight Hundred and ~~Fifty~~ Sixty one

To John Kitching M. D.

Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned Alfred Ball being a (*) Member of the Royal College of Surgeons of England and being in actual practice as a (*) Surgeon hereby certify, that I, on the twenty third day of December at (*) the House of Mr Braithwaite No 2 Mount Terrace in Heworth, in the County of York separately from any other Medical Practitioner, personally examined (*) Sarah Sanderson residing at 2 Mount Terrace and that the said Sarah Sanderson is a single woman is a (*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). – Great mental despondency Believes that she is visited by Spiritual voices every afternoon that direct her what to do for her Spiritual good. Has other delusions

2. Other facts (if any) indicating insanity communicated to me by others (*).

Mr Braithwaite informs me that last night she attempted to throw herself out of the window.

Signed, *Name,* Alfred Ball

Place of Abode, 30 St Saviourgate York

Dated, this twenty third day of December One Thousand Eight Hundred and ~~Fifty~~ Sixty one

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, as the case may be.
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

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

I, the undersigned, Samuel William Wroth
being a (*) Member of the Royal College of Surgeons in London
and being in actual practice as a (†) Surgeon
hereby certify, that I, on the ~~twenty third~~ day of December 1858 at (‡) the house of Mr Braithwaite No 2 Mount Terrace in the suburbs of York in the County of York separately from any other Medical Practitioner, personally examined (§) Sarah Sanderson now residing at No 2 Mount Terrace in the suburbs of York single woman and that the said Sarah Sanderson is a (§) person of unsound mind — and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (‖) A state of despondency which renders her unfit for the ordinary duties of life - a belief that evil spirits visit her and make suggestions of an evil character
2. Other facts (if any) indicating Insanity communicated to me by others (¶). —

Signed, *Name,* Samuel William Wroth

Place of Abode, 16 Castlegate York

Dated this 23 day of December

One Thousand Eight Hundred and ~~Fifty~~ sixty one

(*) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(†) Physician, surgeon, or apothecary, *as the case may be.*
(‡) *Here insert the street and number of the house (if any), or other like part culars.*
(§) *A. B. of ——, insert residence and profession, or occupation, (if any).*
Lunatic, or an idiot, or a person of unsound mind.
(‖) *Here state the facts.*
(¶) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? By Birth

2. Where was the place of birth of the patient? — York

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Deficiency of organisation — physical & mental

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? amiable & sensitive disposition — Moral cleanly of character — Fair average capacity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Nothing particular to notice in early education Educated at Ackworth & York Schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Domestic habits — industrious — temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? — No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Domestic troubles have acutely ~~[illegible]~~ had a depressing effect for many years

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Not aware of any such

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Hereditary predisposition is supposed to exist — Relation of the former generation have been so affected

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?
A slight blow on the head appeared to be the occasion of an attack, at about the age of 19

15. What has been the duration of the present attack?
Abt 3 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Complete - generally - cannot speak to duration

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

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27 Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry Bisley

No 1014.

Sarah J Sewell

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Membership by birth

2. Where was the place of birth of the patient?

Malton Yorks

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

In youth unpleasing — feeble in body — no eccentricity or peculiarity mentally well endowed — no remarkable precocity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? — The understanding not unduly cultivated in early life Education an ordinary one given at home and at Ackworth School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

No particular occupation — habits industrious — Temperance first Conduct during whole life regular & good

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married age 23 — 4 Children 3 living eldest aged 5 years Youngest 8 months

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Never engaged in any particular intellectual pursuit No particular mental bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No pecuniary reverses No disappointments

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Her mother first cousin became insane about 30 years ago

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The Cause of this attack is unknown, unless the death of her Husband which can be allowed —

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? at 29

15. What has been the duration of the present attack? Three Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?
This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
unusual elevation of Spirits
Before the attack was decided - Sleep had been uncertain

19. What were the first decided symptoms of mental aberration?
Mesmeric delusion

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
In the first month manifested by a mesmeric delusion
The mind is affected by various Subjects
No permanent delusion

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?
Prone to destruction of inanimate things
No dangerous attacks on any one

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Does not refuse food.
No tendency to Self injury

23. What are the habits of the patient as regards personal cleanliness and decorum?
Habits unclean - no decorum

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Health not good - Pulse Quick - Tongue Coated
Bowels confined, dark Cast of flesh

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Never in an asylum - Never under Medical Charge
for mental disorder

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
Change of locality - Separation from friends and family
Proper Medical attendance - and no good effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
The disorder is Stationary - There have been lucid intervals
Generally a weeks continuance - The mind was always
most excited at the Monthly period

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27 Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Edwd F Sewell

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive a (*) an Insane person, Sarah Jane Sewell, as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* Edward F. Sewell

Occupation (if any) Grocer

Place of abode, Malton

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Husband of the Patient

Name of Patient, with Christian Name at length	Sarah Jane Sewell
Sex and Age	30 years old
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Grocer's wife
Religious Persuasion, so far as known	of the Society of Friends
Previous Place of Abode	Malton
Whether First Attack	First attack
Age (if known) on First Attack	Nearly 30 years old
When and where previously under Care and Treatment ..	—
Duration of existing Attack	3 months.
Supposed Cause	Loss of a child
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Found Lunatic by examination of two Medical Men separately
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	—

Signed, *Name,* (*) Edwd F Sewell

Dated, this 16th day of 3rd month One Thousand Eight Hundred and ~~Fifty~~ Sixty two

To John Kitching M.D.

Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned Joshua Hartley of Malton Yorkshire being a (†) Member of the Royal College of Surgeons, London and being in actual practice as a (‡) Surgeon hereby certify, that I, on the Sixteenth day of March 1862 at (*) Norton College, Norton near Malton in the County of York separately from any other Medical Practitioner, personally examined (†) Sarah Jane Sewell, wife of Edward Sewell of Malton and that I am a (‡) the said Sarah Jane Sewell and a proper Person to be taken charge of and detained under Person of unsound mind Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (a).—She is excitement and wild in her Conversation she rapidly alters ends having no reason a connection—She has no interest in her usual pursuits—no interest in her family, once her all.

2. Other facts (if any) indicating insanity communicated to me by others (†). That she has lost all Sense of Modesty—Casting off all her clothes—destroying her clothes;—and all and everything she can get hold of—Restless dirty and disorderly

Signed, *Name,* Joshua Hartley, Surgeon

Place of Abode, New Malton York

Dated, this Sixteenth day of March One Thousand Eight Hundred and Fifty two

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(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(†) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(‡) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(†) *Here insert the street and number of the house (if any), or other like particulars.*
(‡) *A. B. of ——, insert residence and profession, or occupation (if any).*
(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Here state the facts.*
(c) *Here state the information, and from whom*

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

I, the undersigned, John James Wright of Malton Yorkshire being a (a) Member of the Royal College of Physicians of London and being in actual practice as a (b) Physician hereby certify, that I, on the sixteenth day of March 1862 at (c) Swinton Cottage, Swinton, near Malton in the County of York separately from any other Medical Practitioner, personally examined (d) Sarah Jane Sewell, wife of Edward Sewell, Grocer, Malton and that the said Sarah Jane Sewell is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) That she talked incessantly and incoherently during the whole time of my examination. Never completing a sentence and passing from subject to subject without any natural connection; that she threw herself wildly, though undressed, on the top of the bed nothes; that she made absurd attempts at [illegible]; and that she hurled about the furniture of the room.

2. Other facts (if any) indicating Insanity communicated to me by others (g). (By her nurse.) That she frequently destroys & burns her clothes; that she breaks cups grasses &c; that she talks incessantly, wildly & incoherently; and that she has lost all interest in her family and in her usual pursuits.

Signed, *Name,* J. J. Wright M.D. Edin &c

Place of Abode, Malton Yorkshire

Dated this sixteenth day of March 1862.

One Thousand Eight Hundred and Fifty sixty two

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Dr Kitchening
Medical Superintendent,
The Retreat,
York.

No 1075.
Harriet Brothers.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is ~~he~~ (or she) in any way connected with the Society of Friends?

Received into membership many years since

2. Where was the place of birth of the patient?

We believe Darby in Pennsylvania

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

We have no means of judging

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was ~~he~~ she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Understanding Medium

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Unknown

6. To what occupation was the patient brought up; and what were ~~his~~ (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

As a domestic Servant — Her conduct appears to have been regular & industrious — Spirituous Stimulants quickly affect her.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was never married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has ~~his~~ her conduct ever exhibited a strong bias in any direction?

We believe not

9. Has any material change taken place in the pecuniary circumstances of the patient; or has ~~he~~ she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No — as a member of our Society she has been comfortably provided for

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

We believe not

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

She had for many years a badly inflamed leg

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

We know of none

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

A gradual decay of the powers of her constitution and a wreck of nerve family ties

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

Some years ago her mind was affected in such a way as to lead her friends to think of placing her under care.

15. What has been the duration of the present attack?

3 or 4 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

During the earlier part of her life she was of an irritable & discontented disposition, but could not be said to be the subject of mental disease which has only shown itself decidedly as her bodily powers have given way

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

See above

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Her rest at night has been very much affected latterly & she has been in a very restless state requiring looking after

19. What were the first decided symptoms of mental aberration?

Melancholy & religious depression

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

See above

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Correct

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is now in pretty good health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

She has been under Medical care for some months past

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joseph Fry Union St Bristol

Treasurer of the Bristol Monthly Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (36 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive a (*) person of unsound mind, as a Patient into the Retreat. Harriet Brothers

Subjoined is a Statement respecting the said

Signed, *Name,* Samuel Farmer

Occupation (if any) Wholesale Flatmer

Place of abode, 97 Kings down Parade Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... a Clerk of Bristol Monthly Meeting

Name of Patient, with Christian Name at length	Harriet Brothers
Sex and Age	female 76 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	domestic servant member of Friends Bristol
Religious Persuasion, so far as known	
Previous Place of Abode	
Whether First Attack	no
Age (if known) on First Attack	not definitely known
When and where previously under Care and Treatment ..	never
Duration of existing Attack	3 or 4 months
Supposed Cause	decay of her physical powers & mental ?
Whether subject to Epilepsy	no
Whether Suicidal	not to our knowledge
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	None

Signed, *Name,* (*) Clarissa Cooper Member of the Monthly Meeting of Bristol M. M.

Dated, this 30th day of March 1862

One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

To John Kitchens M.D.

Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned John Price Challacombe, being a (*) Doctor of Medicine of the University of Edinburgh & a Licentiate of the Apothecaries Company (London) (England) and being in actual practice as a (*) General Practitioner hereby certify, that I, on the Twenty seventh day of March 1862 at (*) the Friends Meeting House, Rosemary St. Bristol in the County of Bristol, separately from any other Medical Practitioner, personally examined (*) Harriet Brothers lately of 4 Upton Cottages Bristol, Widow and formerly a domestic Servant and that the said Harriet Brothers is a (*) Person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). Believes herself to be a lost Soul - that there is no salvation for her - Prays for the Throne of Grace & down the room calling on the Lord again "Where shall I go" "What shall I do" "What will become of me" Refuses to take medicine - Dreads being left alone - and extremely irritable in temper when kept to take medicine -

2. Other facts (if any) indicating insanity communicated to me by others (*). with her two friends - Mr & Mrs Hide looking in the same house with her, she left Upton St. State that the day she left that she was very turbulent as though she must make money with her friends Mrs Blackmore & Mrs Hide told me that for sometime past she is of a morning she would come down to her room half dressed & wander up & down separating the same words that she heard her make use of

Signed, *Name,* John P. Challacombe M.D. and on another occasion she had imagined some person to be in possession of her explaining "Whereas I go he is following me"

Place of Abode, 21 Pembroke St. Bristol

Dated, this Twenty seventh day of March

One Thousand Eight Hundred and ~~Fifty~~ Sixty two —

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, as the case may be.
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of ——, insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

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

I, the undersigned, John Davis,

being a (a) Member of the Royal College of Physicians, & of the Royal College of Surgeons, England, as Surgeon R.N. (retired)

and being in actual practice as a (b) Physician at Bristol,

hereby certify, that I, on the twenty ninth day of March 1862, at (c) number 5, Clarence Court, Clarence Place, Kingsdown, Bristol,* in the County of Bristol, separately from any other Medical Practitioner, personally examined (d) Harriet Brothers, aged 76 years, Spinster, who has been of domestic occupation, and that the said Harriet Brothers is a (e) Person of unsound mind, and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) The condition of this Patient resembles more closely that of senile imbecillity, but she is irritable and disposed to disagree with those whom she may be associated with, without apparent cause, & does not possess self control.

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

The Person in whose house I visited her, informed me that this morning, at an early hour, she got out of bed and came down stairs, without putting on her cloaths.

Signed, Name, John Davis, M.D. Edin.

Place of Abode, 34 Wilson Street Portland Square, Bristol,

Dated this twenty ninth day of March,

One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

* late of Lower Castle Street, Bristol. J.D.

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Dr Kitchiner
Medical Superintendent,
The Retreat,
York

No 1016.

Hannah Buckley

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A member by birthright.

2. Where was the place of birth of the patient?

Manchester.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Amiable, & endowed with a good natural understanding & precocity of intellect.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? No attempt was made early to cultivate the understanding & affections, in very early life. She attended a day school previous to being at Tuckworth, where she remained 3 yrs, afterwards two years at a private boarding-school. & since then has pursued the Study of the French & German languages &c.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Brought up to no particular occupation, industry, temperance, & regular conduct have been conspicuous.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

The patient is single.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

The patient has been an earnest reader of Lamartine Writings, Times of the Chronicles Ruskin Lady Chaucer, Whatelys Essays, Horsleis, Pollock, Young, Cowper, Tennison, Longfellow, Scott Spencer, Wordsworth, & other authors of the same class, also the Biography of Friends such as Gurney, Fruth, Gurney, Grelell. Wheeler Buckley Barclay Rothersfield Scattergood, &c &c.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None whatever.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

When 13 years of age the patient had the Rheumatic fever.
In 8mo 1861 the patient had the Rheumatic fever a second time,

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No hereditary predisposition to the disease is supposed to exist. None of the near relatives of the patient have ever been insane

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Remotely probably a weakly body, & an active mind over wrought by close application to the Study of books & languages &c, & immediately, by entering into deep sympathy with a young bereaved widow, & on the same day seeing the remains of a child & entering into sympathy with the sorrowing mother.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? in the twenty third year of her age.

15. What has been the duration of the present attack? about six weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Some little depression of spirits, & the patient occasionally remarked that her sleep was broken.

19. What were the first decided symptoms of mental aberration?

Confused remarks in conversation, circumstances that had passed years ago, spoken of as if they were recent events,

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She is indifferently affected ~~was~~ by a great variety of subjects, No delusion appears to affect the patient,

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Sometimes she will tear up paper, & pocket handkerchiefs &c ~~&~~ She is not violent, neither has she made attack upon the life of any one.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

The patient has shown no disposition to refuse food or to injure herself in any way.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Is regard to general personal cleanliness & decorum,

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

The patient is in good bodily health though not strong.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never under care

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be declining

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joseph Buckley
18 St Annes Sq
Manchester.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Hannah Buckley a (*) ~~Hannah Buckley~~ person of unsound mind as a Patient into the Retreat.

Subjoined is a Statement respecting the said Hannah Buckley.

Signed, *Name,* Joseph Buckley

Occupation (if any) Tea Dealer.

Place of abode, Sale Nr Manchester.

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Father of the patient.

Name of Patient, with Christian Name at length	Hannah Buckley.
Sex and Age	Female
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	no occupation
Religious Persuasion, so far as known	A Member of the Society of Friends
Previous Place of Abode	Sale
Whether First Attack	First attack.
Age (if known) on First Attack	In the twenty third year
When and where previously under Care and Treatment ..	She never was under treatment
Duration of existing Attack	about six weeks.
Supposed Cause	
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (b) Joseph Buckley.

Dated, this eleventh day of 5th Month

One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

To John Kitching M.D.

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

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

I, the undersigned Herbert Smith Renshaw being a (c) Surgeon and apothecary and being in actual practice as a (d) Surgeon and apothecary hereby certify, that I, on the 10th day of May at (e) Licentiate of the Faculty of Physicians and Surgeons of and Licentiates of the apothecaries Hospital Society London in the County of Nor Father's House Sale ~~[illegible]~~ Chester separately from any other Medical Practitioner, personally examined (f) Hannah Buckley daughter of Joseph Buckley of Sale and that the said Hannah Buckley is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (h). incoherent Language off unmeaning actions

2. Other facts (if any) indicating insanity communicated to me by others (i).

Signed, *Name,* Herbert Smith Renshaw

Place of Abode, Ashton Upon Tuesday.

Dated, this 10th day of May

One Thousand Eight Hundred and ~~Fifty~~ 62.

(a) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(b) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(c) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(d) Physician, surgeon, or apothecary, *as the case may be.*
(e) *Here insert the street and number of the house (if any), or other like particulars.*
(f) *A. B. of ——, insert residence and profession, or occupation (if any).*
(g) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(h) *Here state the facts.*
(i) *Here state the information, and from whom.*

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

I, the undersigned, James Robb
being a (a) Surgeon & Apothecary ×
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the Tenth day of May at (c) her Father's House Sale Moor in the County of Chester separately from any other Medical Practitioner,
personally examined (d) Hannah Buckley Daughter of Joseph Buckley of Sale and that
the said Hannah Buckley is a (e) Person of Unsound Mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—
1. Facts indicating Insanity observed by myself (f) When conversing upon any ordinary subject being unable to connect, one sentence with another & if any question be asked, she at once replies, in language applicable to a contrary interrogation.
2. Other facts (if any) indicating Insanity communicated to me by others (g).

Signed, *Name,* James Robb × L. R. C. S. Edinb. 1828 L. S. A. 1836
Place of Abode, Sale Moor

Dated this Tenth day of May
One Thousand Eight Hundred and ~~Fifty~~ Sixty-Two.

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Dr. Kitchener
Medical Superintendent,
The Retreat,
York.

No 1017.

Geo. Dryden

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No,

2. Where was the place of birth of the patient? Seaton Sluice, Northumberland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Disposition affectionate, character steady, ordinary strength & vigour & no eccentricity or peculiarity, natural understanding [redacted], very good, no precocity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Understanding & affection were cultivated in early life, Common English Education received at a School in the town,

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Brought up a Sailor, he was industrious, temperate & regular, in youth as well as up to the time of the attack

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. He is married, at 40 years of age – Number of Children two,

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No,

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Has had considerable losses in Business,

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Never till present attack

He had two epileptic fits on Sunday May 11th

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Never

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? None

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Nothing particular unless anxiety of mind

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Only for 1 week.

~~[illegible]~~

15. What has been the duration of the present attack?

Twenty days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Depression of spirits loss of sleep — bodily health not affected

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

No delusions.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? not destructive, & not attacked any one

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

exemplary

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In good health,

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Elizth. S. Duplessis his wife
Morton House
North Shields

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive
a (*) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any) _____

Place of abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Name of Patient, with Christian Name at length .. ..

Sex and Age .. ..

Married, Single, or Widowed .. ..

Condition of Life, and previous Occupation (if any) .. ..

Religious Persuasion, so far as known .. ..

Previous Place of Abode .. ..

Whether First Attack .. ..

Age (if known) on First Attack .. ..

When and where previously under Care and Treatment ..

Duration of existing Attack .. ..

Supposed Cause .. ..

Whether subject to Epilepsy .. ..

Whether Suicidal .. ..

Whether Dangerous to others .. ..

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

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

Signed, *Name,* (*) _____

Dated, this day of
One Thousand Eight Hundred and Fifty

To _____
Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned
being a (*)
and being in actual practice as a (*)
hereby certify, that I, on the day of at (*)
in the County of
separately from any other Medical Practitioner,
personally examined (*) and that
the said is a (*)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*).

2. Other facts (if any) indicating insanity communicated to me by others (*).

Signed, *Name,* _____

Place of Abode, _____

Dated, this day of
One Thousand Eight Hundred and Fifty

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom*

MEDICAL CERTIFICATE—Sched. A. No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned,
being a (a)
and being in actual practice as a (b)
hereby certify, that I, on the day of at (c)
in the County of
separately from any other Medical Practitioner,
personally examined (d)
and that
the said is a (e)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—
1. Facts indicating Insanity observed by myself (f)

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

Signed, *Name,*

Place of Abode,

Dated this day of
One Thousand Eight Hundred and Fifty

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No. 1017.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive George Dryden

a (a) person of unsound mind as a Patient into your (b) house

Subjoined is a Statement respecting the said George Dryden

Mary Dryden
No. 1 Cecil street
North Shields
Mother

Signed, Name, Eliz^th S. Dryden

Occupation (if any),

Place of Abode, Northumberland Place North Shields

Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this Twenty first Day of May

One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

To Dr. Ketching

(c) Supt. of the Retreat York

STATEMENT.

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

Name of Patient, with Christian Name at length	George Dryden
Sex and Age	Male, Forty six years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Shipowner
Religious Persuasion, as far as known	Methodist
Previous Place of Abode	Northumberland Place North Shields
Whether First Attack	Yes
Age (if known) on First Attack	Forty six.
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	Fortnight
Supposed Cause	Anxieties of business
Whether subject to Epilepsy	~~Not~~ Yes, has had two fits
Whether Suicidal	Not
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None

Signed, Name, (c) Eliz^th S. Dryden

Occupation (if any),

Place of Abode, Northumb. Place No. Shields

Degree of Relationship (if any) or other circumstances of connexion with the Patient Wife

(a) Lunatic, or an idiot, or a person of unsound mind.
(b) House or hospital.
(c) Proprietor or superintendent of.
(d) *Describing the house or hospital by situation and name, if any.*

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

Lunatics 1.
(16 & 17 Vict. c. 96.)
Private Patient.

London: Printed and Published by Shaw & Sons, Fetter Lane.

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

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

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

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

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

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

I, the undersigned, Donald Mackintosh being a (a) Graduate in medicine of the universities of Glasgow and Durham and being in actual practice as a (b) Physician hereby certify, that I, on the 21st day of May 1862 at (c) Wood Head Farm House Duisdale in the County of Durham separately from any other Medical Practitioner, personally examined Mr George Dryden of (d) No 4 Northumberland Place North Shields Shipowner and that the said Mr George Dryden is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — He is abstracted and speaks little — He is very restless and sometimes excited — frequently dressing and undressing himself — fills his shoes with water orange peel and paper — uses a poker as a shoe horn — knocks at doors

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) by Mrs Dryden Occasionally destructive to furniture — fills his breast with grass, — is in constant motion — gets little sleep — Had two epileptic fits a fortnight ago, attended with apoplectic symptoms — Has attempted to go out of a Window

Signed, *Name,* D. Mackintosh M.D.

Place of abode, Duisdale Park Darlington

Dated this 21st day of May One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

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

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

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

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

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

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

I, the undersigned, William Haslewood being a (a) Graduate in Medicine of the University of Edinburgh and being in actual practice as a (b) Physician & apothecary hereby certify, that I, on the twenty first day of May 1862 at (c) Woodhead farm house Duisdale in the County of Durham separately from any other Medical Practitioner, personally examined Mr George Dryden of (d) No 4 Northumberland Place North Shields Shipowner and that the said Mr George Dryden is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) incoherence, constant restlessness, dressing and undressing himself & spils on his hand & rubs with it his hair — his manner is childish — in writing poured the ink on to the paper to fill his pen from

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) My Mr G. Hanson Pumpers water on to himself & filling his hat with water

Signed, *Name,* Wm Haslewood M.D.

Place of Abode, Darlington

Dated this twenty first day of May One Thousand Eight Hundred and ~~Fifty~~ sixty two —

No. 1017.

No. 1018. Caleb Richardson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A member by birthright—

2. Where was the place of birth of the patient? Bishopwearmouth—Co Durham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Not that we are aware of—

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? He was remarkable for strength without any eccentricity or peculiarity full average understanding—nothing like precocity of intellect—

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? His affections was more than usually cultivated in early life entirely educated at a day school in Sunderland—

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Corn miller—more than usually industrious—his conduct was temperate & regular—during youth & afterwards—

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at the age of 30? Nine children eldest 35 youngest 15—

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? he has been most earnest in business throughout his life has had no bias in any other direction—

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? was Partner in the Concern from 20 at the time of the Sunderland Bank failure—& suffered pecuniary in consequence—had been successful in business that not supplied other reverses—

10. Was the patient ever afflicted with epilepsy, paralysis, or other fits? no—

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? Has had none except temporary illnesses—

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? His father was afflicted with insanity in advanced life—

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Hereditary predisposition was the remote cause—we do not know any immediate cause either for the first & subsequent attacks—

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 64—

15. What has been the duration of the present attack? about a fortnight—

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?
he has had three or four slight attacks previously - lasting generally three or four weeks — & of the same description as the present

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
they were complete & lasted several months—

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
None of the above symptoms were observed—

19. What were the first decided symptoms of mental aberration? extreme restlessness of temper & conduct

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. By extreme restlessness, by violent conduct, by constant boasting of his connexions & possessions — affected indifferently by many subjects — ideas of being slighted by all his friends —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Violence of manner & language — no dangerous attacks upon the life of any one

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No —

23. What are the habits of the patient as regards personal cleanliness and decorum? His habits in these respects are good—

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
He is in great health—

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Never under care of this kind

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mary C Richardson
West Lodge
Sunderland—

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Caleb Richardson a (*) person of unsound mind, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Caleb Richardson

Signed, *Name,* Joseph Richardson

Occupation (if any) Son & Ship Builder

Place of abode, Norton near Malton in Yorkshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Son

Name of Patient, with Christian Name at length	Caleb Richardson
Sex and Age	Male - 66 years
Married, Single, or Widowed	Married -
Condition of Life, and previous Occupation (if any)	Gentleman -
Religious Persuasion, so far as known	Friend -
Previous Place of Abode	West Lodge Sunderland
Whether First Attack	Second -
Age (if known) on First Attack	65 years -
When and where previously under Care and Treatment ..	no where -
Duration of existing Attack	10 days -
Supposed Cause	Pecuniary losses with hereditary disposition -
Whether subject to Epilepsy	no -
Whether Suicidal	no -
Whether Dangerous to others	probably -
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (*) Joseph Richardson

Dated, this 21st day of March

One Thousand Eight Hundred and ~~Sixty~~ two -

To John Hitching, M.D.

Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned George Wilson

being a (*) Surgeon

and being in actual practice as a (*) Surgeon

hereby certify, that I, on the Nineteenth day of May at (*) West Lodge Sunderland in the County of Durham separately from any other Medical Practitioner,

personally examined (*) Caleb Richardson and that

the said Caleb Richardson is a (*)

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

1. Facts indicating Insanity observed by myself (*). Delusions respecting his friends who are conspiring against him, unusual antipathy to his nearest friends and entertains fears that he has lost the protection of Parliament, Public Office Records & Papers

2. Other facts (if any) indicating insanity communicated to me by others (*). incessant talking about by gone occurrences and his general demeanour & dress different from his usual ways

Signed, *Name,* George Wilson

Place of Abode, 29 John Street Bishopwearmouth

Dated, this twenty second day of May

One Thousand Eight Hundred and ~~Fifty~~ Sixty two

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom*

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

I, the undersigned, George Stewardson Brady
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the twentieth day of May at (c)
West Lodge, Sunderland in the County of
Durham separately from any other Medical Practitioner,
personally examined (d) Caleb Richardson of West Lodge
Sunderland and that
the said Caleb Richardson is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) – violence of manner & language. – Extravagant assertion of his own performances, and constant boasting about them. – Unfounded suspicions respecting his family and friends. – Delusions respecting slights which he fancies to have been practiced upon him by many of his friends and acquaintance

2. Other facts (if any) indicating Insanity communicated to me by others (g).
He used personal violence to one of his medical attendants (communicated to me by Mr Welford). He threatened violence against me (told me by one of his sons) and against himself also, asking if they would like to find him hung on a tree.

Signed, *Name,* George Stewardson Brady
Place of Abode, High St West. Sunderland

Dated this 22nd day of May
One Thousand Eight Hundred and ~~Fifty~~ Sixty-two.

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No 1019. Elizabeth Watson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

She is by birthright

2. Where was the place of birth of the patient?

Brigham near Cockermouth

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

gentle disposition in other respects nothing to remark

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

about an average. was educated at Friends School Bootsfield near Wigton

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

active habits. and conduct orderly

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The cause of this first & only attack has been in my opinion from disorder of the function of the liver, &c. T. T. H

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

42 years.

15. What has been the duration of the present attack?

A fortnight.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Simply the sleep broken for about six weeks.

19. What were the first decided symptoms of mental aberration?

A state of religious excitement.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Has various delusions, such as the hearing of sounds &c.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has not done so.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Always Correct.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Hepatic disorder has predominated, with neuralgia, loss of sleep &c. Menstruation has been hitherto regularly performed.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

The predominant symptoms have been treated as they have arisen.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing. Occasional lucid intervals at irregular periods. T.F.H.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Walker

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Watson
a (*) person of unsound mind, as a Patient into the Retreat.
Subjoined is a Statement respecting the said Elizabeth Watson

Signed, *Name,* John Watson

Occupation (if any) Biscuit manufacturer

Place of abode, Whitehaven

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law Brother

Name of Patient, with Christian Name at length	Elizabeth Watson
Sex and Age	Two Forty years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	
Religious Persuasion, so far as known	Society of Friends
Previous Place of Abode	Cockermouth
Whether First Attack	Yes Two
Age (if known) on First Attack	Forty years
When and where previously under Care and Treatment	—
Duration of existing Attack	a fortnight
Supposed Cause	Religious dreamings [illegible]
Whether subject to Epilepsy	No
Whether Suicidal	Has shewn no symptoms
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	—

Signed, *Name,* (*) John Watson

Dated, this 2nd day of 6th Month
One Thousand Eight Hundred and ~~Fifty~~ Sixty Two.

To John Kitching M.D.
Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned
being a (*) Doctor of Medicine, of Kings College, Aberdeen,
and being in actual practice as a (*) General Practitioner
hereby certify, that I, on the First day of June at (*)
No 5, High Street, Whitehaven in the County of Cumberland
separately from any other Medical Practitioner, and that
personally examined (*) Elizabeth Watson, Spinster, aged Forty Years, of Whitehaven
the said Elizabeth Watson is a (*)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*).
Her having attacks of melancholia; also maniacal & hysterical attacks; with intervening lucid intervals.
2. Other facts (if any) indicating insanity communicated to me by others (*).
The friends have reported progress between my daily visits.

Signed, *Name,* Thomas Francis Wilson, M.D.

Place of Abode, Whitehaven

Dated, this First day of June
One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of ——, insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

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

I, the undersigned, Jonathan Brayton
being a (a) Surgeon &c. in the R. C. V. L. S. M. L. M.
and being in actual practice as a (b) General practice ~~as a Surgeon &c~~
hereby certify, that I, on the Second day of June at (c)
M. 5 High Street Whitehaven in the County of
Cumberland separately from any other Medical Practitioner,
personally examined (d) Elizabeth Watson Spinster of Whitehaven and that
the said Elizabeth Watson No. 5 High Street Whitehaven is a (e)
insane and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:— That I found her in an
1. Facts indicating Insanity observed by myself (f) unusually excited condition and unable to talk rationally upon any subject. She also laboured under many delusions. for instance she heard strange noises and frequently affirmed that she was under some peculiar mesmeric influence &c &c
2. Other facts (if any) indicating Insanity communicated to me by others (g).

Signed, Name, Jonathan Brayton
Place of Abode, Queen Street Whitehaven

Dated this Second day of June
One Thousand Eight Hundred and ~~Fifty~~ Sixty two

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Dr Kitchiny
Medical Superintendent,
The Retreat,
York.

No 1020.

Valt G. Clutton

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Birth right

2. Where was the place of birth of the patient? Swansea, Glamorganshire.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Has always appeared to be mentally deranged

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Has been subject to fits of violence from youth possesses imitation which is particulary developed in making rough drawing and singing.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Always refused instruction, therefore never learned to read or write

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

No occupation

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Never has been subject to fits of any kind.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

See No 3.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No cause absolutely known but supposed to have originated on account of his Mother having been greatly alarmed by a fire shortly before his birth.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

See No 12.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? See No 3

15. What has been the duration of the present attack? See No 3.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

See No 3.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

See No 3.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? See No 3.

19. What were the first decided symptoms of mental aberration? See No 3.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Is subject to sudden fits of violence at which times he attempts personal injury which violence has much increased lately

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Is prone to act of destruction but we believe has never made any dangerous attacks upon the life of any person.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has shown no disposition to refuse food.

23. What are the habits of the patient as regards personal cleanliness and decorum? Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

General health good

but removed because deemed of no benefit

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Now three years, from 1851 to 1854 at the "Asylum for Idiots" Hilgate, Middlesex, the discipline of which appeared to increase habits of obedience.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

See No 25

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Clutton
Strand
Swansea.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Valentine George Clutton a (*) Idiot, as a Patient into the Retreat.

Subjoined is a Statement respecting the said Valentine George Clutton

Signed, *Name,* John Clutton

Occupation (if any) Mineral Agent

Place of abode, Strand, Swansea. Glamorganshire.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother.

Name of Patient, with Christian Name at length	Valentine George Clutton
Sex and Age	Male. 26 years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	no occupation
Religious Persuasion, so far as known	none
Previous Place of Abode	Strand, Swansea, Glamorganshire
Whether First Attack	Insane from birth
Age (if known) on First Attack	from birth
When and where previously under Care and Treatment	Three years at an Asylum for Idiots. Hylgate. Middlesex.
Duration of existing Attack	from birth
Supposed Cause	Fright which his Mother received from a Fire shortly before his birth.
Whether subject to Epilepsy	Not subject to Epilepsy
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (*) John Clutton

Dated, this 24th day of June

One Thousand Eight Hundred and ~~fifty~~ sixty two

To John Kitching M.D.

Medical Superintendent of the Retreat, ~~for York~~

(For the Committee.)

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

I, the undersigned James Griffith Hall being a (*) Member of the Royal College of Surgeons of England and being in actual practice as a (*) Surgeon hereby certify, that I, on the 24th day of June at (*) Prospect place Swansea in the County of Glamorgan separately from any other Medical Practitioner, personally examined (*) Valentine George Clutton of 87 Strand Swansea, and that the said Valentine George Clutton is a (*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). His incoherent manner, and his apparent inability to enter into any kind of conversation

2. Other facts (if any) indicating insanity communicated to me by others (*). He has been of unsound mind from his birth, and occasionally he exhibits great violence which has increased of late

Signed, *Name,* J G Hall

Place of Abode, Prospect place Swansea

Dated, this 24th day of June

One Thousand Eight Hundred and ~~fifty~~ sixty two

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(†) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(‡) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gr.*—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(†) *Here insert the street and number of the house (if any), or other like particulars.*
(‡) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(†) *Here state the information, and from whom.*

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

I, the undersigned, Ebenezer Davies,
being a (a) Member of the Royal Coll of Surgeons of England
and being in actual practice as a (b) General Practitioner
hereby certify, that I, on the 24th day of June at (c)
~~Prospect Place~~ in the town of Swansea in the County of
Glamorgan separately from any other Medical Practitioner,
personally examined (d) Valentine George Clutton of 87 Strand Swansea and that
the said Valentine George Clutton is a (e)
idiot and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

87 Strand
ED.:

1. Facts indicating Insanity observed by myself (f) Incoherence of manner & incorrectness in answering the simplest questions — muttering himself

2. Other facts (if any) indicating Insanity communicated to me by others (g).
Pulling out the hair of his head eyebrows & eyelashes & occasional fits of violence

Signed, *Name,* Ebenezer Davies
Place of Abode, 235 High street Swansea

Dated this twenty fourth day of June
One Thousand Eight Hundred and ~~Fifty~~ Sixty Two.

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Dr Kitching
Medical Superintendent,
The Retreat,
York

No 1021. Eliza Temperley

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.

2. Where was the place of birth of the patient? Sunderland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? An active healthy child of ordinary capacity.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Eliza has been well educated; up to the age of eleven at home, from that time to the age of eighteen at one excellent school. She was much attached to her governess.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? A water drinker. Of industrious methodical habits.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Strong bias towards works of charity and nursing the sick.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.

10. Was the patient ever afflicted with epilectic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, ~~and what those of the subsequent and last attacks of mental disorder~~? Constipation, ~~and~~ Other functional derangements for the first time last week.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? In her twenty first year.

15. What has been the duration of the present attack? Ten days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

That she has been to Heaven.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

A disinclination to food, but not absolute refusal.

23. What are the habits of the patient as regards personal cleanliness and decorum? Those of a lady.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

N.B. all letters to be sent to me ~~[illegible]~~ to be addressed (Private)

John Humphrey her Father
3 White Lion Court
Cornhill E C
London

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive
a (*) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any) _____

Place of abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... _____

Name of Patient, with Christian Name at length .. ..

Sex and Age .. ..

Married, Single, or Widowed .. ..

Condition of Life, and previous Occupation (if any) .. ..

Religious Persuasion, so far as known .. ..

Previous Place of Abode .. ..

Whether First Attack .. ..

Age (if known) on First Attack .. ..

When and where previously under Care and Treatment ..

Duration of existing Attack .. ..

Supposed Cause .. ..

Whether subject to Epilepsy .. ..

Whether Suicidal .. ..

Whether Dangerous to others .. ..

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

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

Signed, *Name,* (*) _____

Dated, this day of
One Thousand Eight Hundred and Fifty

To John Kitching M. D.
Medical Superintendent of the Retreat near York. *(For the Committee.)*

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

I, the undersigned
being a (*)
and being in actual practice as a (*)
hereby certify, that I, on the day of at (*)
in the County of
separately from any other Medical Practitioner,
and that
personally examined (*)
the said is a (*)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*).

2. Other facts (if any) indicating insanity communicated to me by others (*).

Signed, *Name,* _____

Place of Abode, _____

Dated, this day of
One Thousand Eight Hundred and Fifty

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom*

MEDICAL CERTIFICATE—Sched. A. No. 2, Sects. 4, 5, 9, 10, 11, 12, 13.

I, the undersigned,
being a (a)
and being in actual practice as a (b)
hereby certify, that I, on the day of at (c)
in the County of
separately from any other Medical Practitioner,
personally examined (d)
and that
the said is a (e)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—
1. Facts indicating Insanity observed by myself (f)

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

Signed, *Name,*

Place of Abode,

Dated this day of
One Thousand Eight Hundred and Fifty

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(b) *Physician, surgeon, or apothecary, as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like part culars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) *Lunatic, or an idiot, or a person of unsound mind.*
(f) *Here state the facts.*
(f) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No 1021.

RETREAT, ~~MOUNT~~ ~~STEAD~~, NR. ~~ILKLEY~~.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Eliza Temperley

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

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

Subjoined is a Statement respecting the said Eliza Temperley

Signed, *Name,* John Temperley

Occupation (if any), Ship Owner

Place of Abode, Upton Essex

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Seventeenth Day of July

One Thousand Eight Hundred and Sixty Four.

To ~~MESSRS. SMITH~~ Doctor Kitching

Proprietors of the Retreat, ~~Mount Stead, near Otley.~~

STATEMENT.

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

Name of Patient, with Christian Name at length	Eliza Temperley
Sex and Age	Female Twenty
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Ladies Maid
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Upton Essex
Whether First Attack	Yes
Age (if known) on First Attack	
When and where previously under Care and Treatment	No where
Duration of existing Attack	Ten Days
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None

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

Signed, *Name,* (c) John Temperley

Occupation (if any), Ship Owner

Place of Abode, Upton Essex

Degree of Relationship (if any) or other circumstances of connexion with the Patient Father

Lunatics 1.

(16 & 17 Vic. c. 96, *Private Patient.*

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

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

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

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

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

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

I, the undersigned, William Macleod.
being a (a) Licentiate of the College of Surgeons Edinburgh & FRCPE
and being in actual practice as a(b) Physician
hereby certify, that I, on the seventeenth day of July 1862
at (c) Ben Rhydding Otley
in the County of York separately from any other Medical Practitioner,
personally examined Eliza Lempriere of (d)
Elmo Upton Essex and that
the said Eliza Lempriere Spinster is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Fancies, she has been
risen heaven. Incoherence & Violence

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

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

Signed, *Name,* W Macleod

Place of Abode, Ben Rhydding Otley Yorkshire

Dated this Seventeenth day of July One Thousand Eight Hundred and Sixty two

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

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

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

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

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

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

I, the undersigned, William S. Craig. Edinburgh and
being a (a) Licentiate of the College of Surgeons Doctor of Medicine of St Andrews University —
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the seventeenth day of July
at (c) Ben Rhydding, Otley.
in the County of York separately from any other Medical Practitioner,
personally examined Eliza Lempriere of (c)
Elmo, Upton, Essex and that
the said Eliza Lempriere Spinster is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Excited talking and tearing a handkerchief — delusion, as to having been in heaven — &c

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

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

Signed, *Name,* W. S. Craig. M.D. MRCS

Place of Abode, Leeds: 9 Park Place

Dated this Seventeenth day of July One Thousand Eight Hundred and Sixty two —

As the successful Treatment of Insane Persons may depend much upon the Information received relative to their cases, the friends and Medical Attendants of Patients are earnestly requested carefully to answer the following Queries, and to add any other Particulars connected with the Patient's Disorder or character which they may think useful.

What is the Patient's Natural Temper? .. ..

———————Favourite Pursuits? ... ...

———————Habits as to Temperance ... ...

Is this the first attack of Insanity, if not, how many previous ones, and at what periods of Life? ... ...

How long since the commencement of the present Attack? ...

How many years, months, or weeks have premonitory Symptons been noticed? ... ...

What circumstances are supposed to have been the exciting cause? ... ...

Of what sensations in the Head does the Patient generally complain, i.e. Pain, Heat, Throbbing, Noise, or Giddiness? ...

Has any, and what, change taken place in the Symptons, Manners, Disposition, Spirits, or Expression of Countenance?

If the Patient has shown any Dislike or Prejudice against any particular Persons, state such circumstances as may be deemed necessary? ... ...

Does the malady appear to be increasing, declining, or stationary, or has any durable change in its form occurred? ...

Before the symptons became manifest, was there any unusual Depression or Elevation of Spirits, was any alteration observed in the Temper, Disposition, Opinion, Conduct, Sleep, Appetite, State of Bowels, or Health of the Patient, and how long before the Attack were such precursory Symptoms observed? ... ...

Is it a case of considerable Violence, or is the Patient in a Tractable State? .. ..

Is there, or has there been any Disposition to self-Destruction, and by what means? ... ...

———————or to destroy Clothes or break Furniture? ...

———————or to refuse Food? ... ...

Is the Patient Mischievous, and in what respect? ... ...

———————subject to Fits of Phrensy? ... ...

———————sensible of and attentive to the Calls of Nature?

Does the Patient rave indifferently on various Subjects, or chiefly on one, and what is it? ... ...

Is his Conversation on general Subjects collected and rational or flighty, wild or incoherent? ... ...

What absurd Ideas or extravagant Notions does he in particular entertain, and upon what subjects is his Understanding most disordered? Mention any particular or remarkable Illusion,

Has the Patient been under Medical Treatment in any period of his or her insanity, and if so, for how long a period, and with what degree of Benefit? ... ...

Is the Patient in good Bodily Health? if not describe the Disease particularly. ... ...

Has he or she been afflicted with Fits, Palsy, or other Disease?

Have any of the Patients's Relatives laboured under similar Disease? ... ...

A Quarter's Board to be paid in Advance, and the First Quarter to be sent with the Patient.

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No. 1022. Sarah Sanderson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry Hipsley

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Sanderson
a (*) Lunatic or of unsound mind, as a Patient into the Retreat.
Subjoined is a Statement respecting the said Sarah Sanderson

Signed, *Name,* Henry Kipsley

Occupation (if any) —

Place of abode, Tweens Place Hilgate York

Degree of Relationship (if any), or other circumstances of connexion with the Patient —

Name of Patient, with Christian Name at length .. .. Sarah Sanderson
Sex and Age .. .. Female aged 40 yrs
Married, Single, or Widowed .. .. Single.
Condition of Life, and previous Occupation (if any) .. .. Daughter of a Merchant.
Religious Persuasion, so far as known .. .. Society of Friends.
Previous Place of Abode .. .. York.
Whether First Attack .. .. No
Age (if known) on First Attack .. ..
When and where previously under Care and Treatment .. Retreat near York.
Duration of existing Attack .. .. about 4 weeks.
Supposed Cause .. .. Agitation from extra exertion & depression.
Whether subject to Epilepsy .. .. No
Whether Suicidal .. .. No- not at present.
Whether Dangerous to others .. .. No-
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .. .. No-
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners .. .. —

Signed, *Name,* (*) Henry Kipsley

Dated, this 18th day of Seventh Mo: 1862

One Thousand Eight Hundred and Fifty

To John Kitching M.D.
Medical Superintendent of the Retreat, near York.

(For the Committee.)

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

I, the undersigned Samuel William Wolff
being a (*) Member of the Royal College of Surgeons in London
and being in actual practice as a (*) Surgeon
hereby certify, that I, on the 18th day of July 1862 at (*)
the house Richard Myers of 35 Dove Street York in the County of
York separately from any other Medical Practitioner,
personally examined (*) Sarah Sanderson now of 35 Dove Street York Single Woman and that
the said Sarah Sanderson is a (*)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). A state of depression & low spirits rendering her unfit for the ordinary duties of life. Delusions & impediments in her speech & her father is living the house he is dead & in his character her father is living

2. Other facts (if any) indicating insanity communicated to me by others (*).

Signed, *Name,* Samuel Wm Wolff

Place of Abode, 31 Castlegate York

Dated, this 18th day of July
One Thousand Eight Hundred and ~~Fifty~~ Sixty two.

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

66

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

I, the undersigned William Procter
being a (a) M.R.C.S.E.
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the eighteenth day of July at (c)
the house of Richard Rogers 35 Dove St York in the County of
York separately from any other Medical Practitioner,
personally examined (d) Sarah Sanderson, Spinster of 35 Dove St
York and that
the said Sarah Sanderson is a (e)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She is low & desponding & has
numerous delusions, such as that she is suffering for the
sins of others & cannot die ~~to~~ until she is put in a coffin
alive

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

Signed, *Name,* William Procter

Place of Abode, 24 Petergate York

Dated this eighteenth day of July

One Thousand Eight Hundred and ~~Fifty~~ sixty two

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Medical Superintendent,
The Retreat,
York.

No 1023. Edward Lawson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

a Member

2. Where was the place of birth of the patient? Worsley

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Very quiet

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at a common Day school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Weaver always temperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 30 yrs of age — one child aged 24 yrs

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

He last few years has kept a shop — Fifteen years previously kept a day school.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

His business has been unsuccessful

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Has had one slight paralytic attack

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

A always a delicate man

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

a distant relation has been in an Asylum

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

~~Probably~~ general debility & trouble in regard to his business

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? The first attack aged 56

15. What has been the duration of the present attack? Three months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Depression of spirits and loss of sleep for some months past

19. What were the first decided symptoms of mental aberration?

Raveling talk

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

An attempt on his life

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

None

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He eats but a little — no abnormal

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Poor health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

The Lunatic Asylum

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Edward Lawson a (*) , as a Patient into the Retreat.

Subjoined is a Statement respecting the said

Signed, *Name,* John Whitley

Occupation (if any) Draper

Place of abode, Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient a friend

Name of Patient, with Christian Name at length	Edward Lawson
Sex and Age	Man 56 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Shop keeper
Religious Persuasion, so far as known	Society of Friends
Previous Place of Abode	Hatchmyley
Whether First Attack	Yes
Age (if known) on First Attack	56 years
When and where previously under Care and Treatment	At home
Duration of existing Attack	Two months
Supposed Cause	anxiety respecting business
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	

Signed, *Name,* (*) John Whitley

Dated, this 29 day of 7 month, 1862

One Thousand Eight Hundred and Fifty

To John Ritchie M.D.

Medical Superintendent of the Retreat, near York

(For the Committee.)

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

I, the undersigned J. D. Heaton M.D. Lond. L.R.C.P.L. being a (*) Physician and Doctor of Medicine of the University of London and Member of the Royal College of Physicians London and being in actual practice as a (*) Physician hereby certify, that I, on the 29th day of July 1862 at (*) the Leeds Infirmary in the County of York separately from any other Medical Practitioner, personally examined (*) Edward Lawson Shopkeeper, of Stanningley and that the said Edward Lawson is a (*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). His gloomy appearance, and taciturn manner, refusing to answer ordinary enquiries, & his unconnected and purposeless movements.

2. Other facts (if any) indicating insanity communicated to me by others (*). That he made an attempt upon his life on the 27th Inst, and that he says much that is irrational and unfounded. These facts were communicated to me by his wife.

Signed, *Name,* J. D. Heaton M.D.

Place of Abode, Claremont Leeds.

Dated, this 29th day of July 1862

One Thousand Eight Hundred and Fifty

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.
(*) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, as the case may be.
(*) Here insert the street and number of the house (if any), or other like particulars.
(*) A. B. of ——, insert residence and profession, or occupation (if any).
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) Here state the facts.
(*) Here state the information, and from whom.

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

I, the undersigned, John Lambert ~~Surgeon and Apothecary~~ Member of the Royal College of Surgeons England or Accoutrement of the Society of Apothecaries.
being a (*) General Practitioner
and being in actual practice as a (*) 28th day of July 1862 at (*)
hereby certify, that I, on the Town Street Stanningley near Leeds. in the County of
See Note York separately from any other Medical Practitioner,
personally examined (*) Edward Lawson, Shopkeeper, Stanningley and that
the said Edward Lawson is a (*)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (†)
this melancholy appearance & reserved manner - refusing to answer ordinary questions & his irregular and purposeless movements

2. Other facts (if any) indicating Insanity communicated to me by others (‡).
From hiring made an attempt to commit suicide on the 27th inst and that which he says is irrational and not strictly true - communicated by his wife

Signed, *Name,* John Lambert

Place of Abode, Farsley near Leeds

Dated this 4th day of July

One Thousand Eight Hundred and ~~Fifty~~ Sixty Two

(*) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.*
(†) Physician, surgeon, or apothecary, *as the case may be.*
(‡) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(*) Lunatic, or an idiot, or a person of unsound mind.
(†) *Here state the facts.*
(‡) *Here state the information, and from whom.*

Dr Kitchiney
Medical Superintendent,
The Retreat,
York

No 1024.

Catherine Gregory.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

She is in membership

2. Where was the place of birth of the patient?

Claverham, Somersetshire 27th of 5th month 1862

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

In youth & up to within a few years she was somewhat reserved but of a deeper disposition - no eccentricity - natural understanding moderate - no precocity of intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

The affections not much cultivated her education was at Friends Schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

The ~~[illegible]~~ duties incident to her being the eldest of a large family - her conduct regular & intelligent nearly all her life

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has ~~his~~ her conduct ever exhibited a strong bias in any direction?

No to both parts of the question

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

A disappointment in love about 20 years since, which has much influenced her since

10. Was the patient ever afflicted with epilectic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

None whatever

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

There is some hereditary predisposition on her Father's side her Grandmother having destroyed herself and an uncle (Joseph Gregory) and an aunt (Martha Miles) having been at the Retreat.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The cause is no doubt that mentioned under No 9 - the exciting cause being an interview with the person with whom she was in love - about two months since

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

abrt. 50

15. What has been the duration of the present attack?

more or less until now

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

once - in 1847 - duration a month or two - form depression from the cause alluded to in No 9

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

apparently so - many years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No unusual change observed

19. What were the first decided symptoms of mental aberration?

Strong expressions of Religious Despondency

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She appears to be same on all other subjects than that alluded to - She is not the subject of any delusion beyond that.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She made an attempt to destroy herself on 3rd inst but has shown no symptoms whatever of intention to injure any one else

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She does not refuse food - see answer to 21 -

23. What are the habits of the patient as regards personal cleanliness and decorum?

quite as they should be

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes very good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never under care

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

No medical means beyond healing the wound she inflicted on herself

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

apparently somewhat declining

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Frederick Gregory
37 Wine Street
Bristol.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Catherine Gregory
a (*) ~~Person of unsound mind~~ as a Patient into the Retreat.
Subjoined is a Statement respecting the said Catherine Gregory

Signed, *Name,* Edwin Gregory
Occupation (if any) Silk Mercer
Place of abode, 37 Wine St Bristol
Degree of Relationship (if any), or other circumstances of connexion with the Patient ..... Brother

Name of Patient, with Christian Name at length .. .. Catharine Gregory
Sex and Age .. .. female 50
Married, Single, or Widowed .. .. single
Condition of Life, and previous Occupation (if any) .. .. ~~Servant~~ kept the Bristol Coffee House.
Religious Persuasion, so far as known .. .. member of Church of Engd
Previous Place of Abode .. .. Street, Somersetshire
Whether First Attack .. .. ~~first~~ : no
Age (if known) on First Attack .. .. about 35 when she was subject to a fit of despondency for some weeks.
When and where previously under Care and Treatment .. not under treatment
Duration of existing Attack .. .. about 6 weeks
Supposed Cause .. .. disappointment in love
Whether subject to Epilepsy .. .. no
Whether Suicidal .. .. ~~suppose she~~ yes —
Whether Dangerous to others .. .. not at all
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .. ..
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners .. ..

Signed, *Name,* (*) Edwin Gregory
Dated, this Thirteenth day of Eighth month
One Thousand Eight Hundred ~~and Fifty~~ Sixty two —

To John Kitching M.D.
Medical Superintendent of the ~~Retreat, near York.~~

(For the Committee.)

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

I, the undersigned Joseph Lawrence
being a (*) Member of the Royal College of Surgeons England
and being in actual practice as a (*) General practitioner
hereby certify, that I, on the 30th 5th 7th 8th 10th 12th days of August at (*)
Bewdley Villa, Bath in the County of
Somerset separately from any other Medical Practitioner,
personally examined (*) Catharine Gregory of Bewdley Villa, ~~Bristol~~ and that
the said Catharine Gregory is a (*)
person of unsound mind and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). I visited Catharine Gregory immediately after her attempt at suicide on the 8th inst. found a severe wound in the neck which severed the left jugular vein the lung at the time in a state of viscera collapse from loss of blood. When sufficiently recovered to speak she expressed a desire that we should not do anything for her, as she was unfit to live. She was evidently sorry the attempt was unsuccessful. I have visited her daily since the 8th inst. on each occasion have observed great abstraction of manner, & have found much reluctance in answering questions & suspicions, avoid eyesight, fauna of the eye.
2. Other facts (if any) indicating insanity communicated to me by others (*).
That she has been in a desponding state of mind for several weeks past. Since her attempt on her life she has expressed her sorrow that it was not successful and at times has been very restless & impatient of being constantly watched.

Signed, *Name,* Joseph Lawrence
Place of Abode, W Clarendon St Bath
Dated, this Thirteenth day of August
One Thousand Eight Hundred and ~~Fifty~~ Sixty two

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, insert residence and profession, or occupation (*if any*).
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom.*

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

I, the undersigned, Frederick Hanham,
being a (a) Member of the Royal College of Surgeons, & Licentiate of the Apothecaries Company,
and being in actual practice as a (b) Surgeon & Apothecary,
hereby certify, that I, on the twelfth day of August, 1862, at (c)
in the County of Bewdley Villa, Prior Park Road, Bath, separately from any other Medical Practitioner,
personally examined (d) Somerset; Catharine Gregory, Housekeeper, Bewdley Villa, Bath, and that
the said Catharine Gregory is a person of Unsound Mind, is a (e)
and a proper Person to be taken charge of and detained under
Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Wildness & strangeness of manner & expression of countenance. Religious despondency, if not delusion. She states herself to be wretched & wicked past forgiveness:—that she cannot be forgiven & that she is possessed of evil spirits that are constantly troubling her. Under this feeling a week ago, she attempted suicide by cutting her throat.

2. Other facts (if any) indicating Insanity communicated to me by others (g). Her relatives say she has been crossed or disappointed in love & ~~she shall~~ they fear she will not be happy again. They are in dread also that she may make another attempt upon her life & are obliged in consequence to watch her night & day. —

Signed, *Name,* Fred^k Hanham

Place of Abode, 5 Miles's Bdg's, Bath.

Dated this twelfth day of August,

One Thousand Eight Hundred and ~~Fifty~~ Sixty-two. —

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any).*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

John Kitchiny M.D.
Medical Superintendent,
The Retreat,
York.

No 1025.
J G S Cadell

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? He is not

2. Where was the place of birth of the patient? Madras

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? None were observable during the Patient youth

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The Patient had a good education, chiefly at Edinburgh Academy from perhaps 7 to 12 years old, and for 2 or 3 years at the Middlebury College, Vermont

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? In the Military Profession he was diligent, sober, studious, and more than active and zealous; and in every way most Exemplary.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Never Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? After being in India for nine years he took a strong religious bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Never

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind? He once got a severe fall from his horse when charging in front of his troop, after severe

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No hereditary predisposition was supposed to exist, but an Aunt & Uncle on the Mother's side suffered from weakness of mind

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The fall of the Patient with his horse, alone mentioned; together with the effects of an Indian climate, are the only causes that can be attributed perhaps to first attack

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? At about 22 years of age

15. What has been the duration of the present attack? ~~Abroad 23 yr~~
Since February 1845

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? The first attack was about 1839 when the patient returned to England. He went to India again in 1841 as recovered, but had to return to England in 1847

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? Between the first and second attack the recovery does not appear to have been complete, as he continued eccentric

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? As he was at this time ~~with~~ with his Regiment, and away from his friends this question cannot be correctly answered

19. What were the first decided symptoms of mental aberration? For the reasons given in the previous answer, this cannot be answered

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Is alternately liable to depressions and excitement. Believes that he is engaged to a young lady in the South of England and is always wanting money to get away to see her.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No
Does not take food so well during period of depression

23. What are the habits of the patient as regards personal cleanliness and decorum? His habits are always perfectly cleanly and decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Is generally in good bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Vid "Statement"

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
The usual treatment as a public Asylum

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Appears stationary vid No. 20

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
William Wood Accountant Edinburgh, who is Curator Bonis (equivalent to Committee) to the Patient

No 1025.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96.)

The Act of Parliament requires that the Order for the Reception and the Medical Certificates shall bear date not more than seven days previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case, two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive a (*) person of unsound mind, as a Patient into the Retreat. James George Scott Cadell late Lieutenant Madras Light Cavalry

Subjoined is a Statement respecting the said James George Scott Cadell

Signed, *Name,* R. Cadell

Occupation (if any) Lt. Colonel Royal Artillery

Place of abode, 12 Shandwick Place Edinburgh

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother, and one of the Executors of Lt. James George Scott Cadell

Name of Patient, with Christian Name at length .. .. James George Scott Cadell

Sex and Age .. .. Male Forty Five

Married, Single, or Widowed .. .. Single

Condition of Life, and previous Occupation (if any) .. .. Gentleman Formerly Lieutenant in H. Majesty's Light Cavalry

Religious Persuasion, so far as known .. .. Church of England

Previous Place of Abode .. .. In Lodgings at the Bachelors Club at Carlisle for [illegible] Dumfries, since

Whether First Attack .. .. Not the first

Age (if known) on First Attack .. .. About 22 from date

When and where previously under Care and Treatment .. At different Intervals for the last 1829 First at the Institution Dumfries, most likely high - afterwards at Edinburgh Institution and latterly at the Bachelors Club Dumfries

Duration of existing Attack .. .. Has been more unwell since the June 1859.

Supposed Cause .. .. A fall with his horse in India - Religious excitement and climate of India

Whether subject to Epilepsy .. .. Not subject.

Whether Suicidal .. .. Not at all.

Whether Dangerous to others .. .. Not dangerous.

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .. .. Not known

Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners .. .. None

Signed, *Name,* (*) William Wood Accountant Resident 2 Hopefield Terrace Edinburgh

Dated, this Twenty day of September 1862

One Thousand Eight Hundred and ~~Sixty~~ Sixty two

To John Kitching M.D. Curator Bonis for the party

Medical Superintendent of the Retreat, near York. *(For the Committee.)*

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

I, the undersigned James Robert McC

being a (*) Graduate of the University of Edinburgh and being in actual practice as a (*) Physician hereby certify, that I, on the Thirtieth day of August 1862 at (*) Buchton Royal Institution Dumfries in the County of Dumfries personally examined (*) James Geo. Scott Cadell and that the said James Geo. Scott Cadell is a (*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion from the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*). is restless and excitable—has alternately paroxysms of depression and excitement—sometimes violent—sometimes talkative—

2. Other facts (if any) indicating insanity communicated to me by others (*).

Is sometimes violent

Signed, *Name* James Robert McC

Place of Abode, Buchton House Dumfries

Dated, this Thirtieth day of August

One Thousand Eight Hundred and ~~Sixty~~ Sixty two

(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*
(*) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(*) Physician, surgeon, or apothecary, *as the case may be.*
(*) *Here insert the street and number of the house (if any), or other like particulars.*
(*) *A. B. of* ——, *insert residence and profession, or occupation (if any).*
(*) Lunatic, or an insane person, or an idiot, or a person of unsound mind.
(*) *Here state the facts.*
(*) *Here state the information, and from whom*

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No 2

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

I, the undersigned, Hugh Grainger Stewart being a (*) Graduate of the University of Edinburgh in Medicine & Licentiate of the Royal College of Surgeons Edinburgh and being in actual practice as a (*) Physician hereby certify, that I, on the thirtieth day of August 1862 at (*) Crichton Royal Institution Dumfries in the County of Dumfries separately from any other Medical Practitioner, personally examined (*) James George Scott Cadell formerly Lieutenant in the Madras Light Cavalry now an inmate in this Asylum and that the said James George Scott Cadell is a (*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*)
Manner restless very easily excited when opposed gets into a state of great excitement and becomes violent & dangerous

2. Other facts (if any) indicating Insanity communicated to me by others (*).
Informed by the attendant that he is variable irritable and solitary in his habits

Signed, Name, Hugh G Stewart M.D

Place of Abode, Crichton Institution Dumfries

Dated this 30th day of August

One Thousand Eight Hundred ~~and Fifty~~ Sixty two years

(*) Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.

(*) A. B. of ——, insert residence and profession, or occupation, (if any).
(*) Lunatic, or an idiot, or a person of unsound mind.
(*) Here state the facts.
(*) Here state the information, and from whom.

Dr Kitching
Medical Superintendent,
The Retreat,
York

No 1026. Sophia Crow

DINSDALE PARK RETREAT, DURHAM.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Sophia Crow a person of unsound mind as a Patient into your (b) House
Subjoined is a Statement respecting the said Sophia Crow

Signed, *Name,* Anne Austin

Occupation (if any), Gentlewoman

Place of Abode, Millfield Terrace Gateshead

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this 16th Day of April
One Thousand Eight Hundred and ~~Fifty~~ Sixty.

To Dr Mackintosh
(c) Proprietor of Dinsdale Park Retreat

STATEMENT.

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

Name of Patient, with Christian Name at length	Sophia Crow
Sex and Age	Female 26
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Norton Stockton
Whether First Attack	Second attack
Age (if known) on First Attack	21 January
When and where previously under Care and Treatment	Dr Sutherland,
Duration of existing Attack	about three months
Supposed Cause	not known
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	if opposed
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none

Signed, *Name,* (c) Anne Austin

Occupation (if any), Gentlewoman

Place of Abode, Millfield Terrace Gateshead

Degree of Relationship (if any) or other circumstances of connexion with the Patient Sister

(a) Lunatic, or an idiot, or a person of unsound mind.
(b) House or hospital.
(c) Proprietor or superintendent of.
(d) *Describing the house or hospital by situation and name, if any.*

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

Lunatics 1.
(16 & 17 Vict. c. 96.)
Private Patient.

London: Printed and Published by Shaw & Sons, Fetter Lane.

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

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

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

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

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

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

(f) *Here state the facts.*

I, the undersigned, Charles Trotter being a (a) Fellow of the Roy.l Coll.e of Surgeons, and Licentiate of the apothecaries Company and being in actual practice as a (b) General Practitioner hereby certify, that I, on the 16th day of April 1860 at (c) Norton in the County of Durham separately from any other Medical Practitioner, personally examined Miss Sophia Crow of (d) Norton in the County of Durham and that the said Sophia Crow is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Gives no reply to questions, looks vacant and meaning

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) wont conform to usual domestic arrangements & if opposed is violent and excited

Signed, Name, Charles Trotter

Place of abode, Stockton on Tees

Dated this 16th day of April One Thousand Eight Hundred and Sixty

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

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

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

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

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

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

(f) *Here state the facts.*

I, the undersigned, William Richardson being a (a) Licentiate of the apothecaries Company and being in actual practice as a (b) Surgeon & apothecary hereby certify, that I, on the 16th day of April 1860 at (c) Norton in the County of Durham separately from any other Medical Practitioner, personally examined Miss Sophia Crow of (d) Norton and that the said Sophia Crow is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Looking vacantly at objects and general incoherence

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) unsettled in her conduct, moving furniture from place to place, deluging her bed.—Communicated by Mrs Austin Miss Crows Sister

Signed, Name, William Richardson

Place of Abode, Stockton on Tees

Dated this 16th day of April One Thousand Eight Hundred and Sixty.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 15th day of Sept.r 1862, of Sophia Crow a Private Patient in Dinsdale Park ~~House~~, Darlington to the Retreat ~~House~~, near York.

Given under our hands this 26th day of August in the year of Our Lord One Thousand Eight Hundred and Sixty two

Commissioners in Lunacy.

ORDER.

I,* Anne Austin the undersigned having Authority to discharge Sophia Crow a Private Patient in Dinsdale Park ~~House~~, Darlington hereby order and direct that the said Sophia Crow be removed therefrom to the Retreat, ~~House~~, near York

Given under my hand this* 27th day of August. in the year of Our Lord One Thousand Eight Hundred and Sixty two

(Signed) Anne Austin.

Place of Abode 4: Park Road. Newcastle-on-Tyne.

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

75

No 1027. Wm A. Doncaster

NOTICE OF ADMISSION.

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

I

I hereby give you Notice, That

.

(a) House or hospital.

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

Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

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

Signed, _____

(c) _____

(c) Superintendent or proprietor of ——.

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

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

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive William Allen Doncaster whom I last saw at his father's house on the Morning of this 1st day of 10 month (Oct), (a) a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said W. A. Doncaster

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

Signed, *Name,* Danl Doncaster.
Occupation (if any), Stil Manufr. H
Place of Abode, Broom Hall Road, Sheffield
Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle no number to House

Dated this 1st Day of 'Oct' ~~1862~~
One Thousand Eight Hundred and Sixty two

To John Kitchin M.D.
(c) Medical Superintendent (d) The Friends Retreat.

(c) Proprietor or superintendent of ——.
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

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

Name of Patient, with Christian Name at length	William Allen Doncaster
Sex and Age	male — Twenty-five years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Clerk or Warehouseman — last employed as Goods' Clerk in Northern Railway
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	Oxford Street Sheffield
Whether First Attack	Believe so
Age (if known) on First Attack	
When and where previously under Care and Treatment	
Duration of existing Attack	Some months
Supposed Cause	not known to me
Whether subject to Epilepsy	no
Whether Suicidal	I have seen nothing to lead to the supposition
Whether Dangerous to others	— think not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Two Medical men certify to his mind being disordered.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Danl Doncaster — address as above

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

Signed, *Name,* (e) Danl Doncaster
Occupation (if any),
Place of Abode, See above
Degree of Relationship (if any), or other circumstances of connexion with the Patient Ditto

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, name William Sennard
being a (a) Doctor of Medicine of Sheffield Edinburg
and being in actual practice as a (b) Physician
hereby certify, that I, on the 30th day of September
at (c) Oxford Street Albert Place Sheffield (no number to the house)
in the County of York separately from any other Medical Practitioner,
personally examined William Allen Doncaster of Albert Place
of (d) Sheffield Oxford Street and that
the said William Allen Doncaster Railway Clerk
is a (e) ~~fit~~ Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) That he is under the delusions that his body is bursting, and other false convictions in relation to his health, by which he becomes intolerable to his friends.

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

That he required the means to be afforded him by which he could open his belly

Signed, Name, William Sennard

Place of Abode, Orchard Place Sheffield

Dated this thirtieth day of September One Thousand Eight Hundred and Sixty two

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, John Haxwath
being a (a) Member of the Royal College of Surgeons and Licentiate of the Apothecary's Company London
and being in actual practice as a (b) Surgeon &c &c
hereby certify, that I on the First day of October
at (c) Albert Place. Oxford Street. Sheffield (no number to the house)
in the County of York separately from any other Medical Practitioner,
personally examined William Allen Doncaster Albert Place
of (d) Sheffield, late Clerk at a Railway Station and that
the said William Allen Doncaster
is a ~~(e)~~ × ~~Melancholic~~ — and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

× a person of unsound mind

1. Facts indicating Insanity observed by myself (f)

There have been threatenings of Self Destruction, and a constant preying on his mind, that there is internal bursting of the Bowels, with breaking of Bones —

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

There is a great dislike to being disturbed or having his Clothes put on —

Signed, Name, Jh Haxwath

Place of Abode, 25 Fig Tree Lane, Sheffield

Dated this First day of October One Thousand Eight Hundred and Sixty Two.

× [illegible]

No 1028. Sophia Southall

NOTICE OF ADMISSION.

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

I hereby give you Notice, That

.

(a) House or hospital.

was admitted into this (a) as a Private Patient, on the Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

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

Signed, _____

(c) _____

(c) Superintendent or proprietor of ——.

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

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

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Sophia Southall

whom I last saw at York

on the 21st day of 10th mo 1862 (a)

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

Subjoined is a Statement respecting the said Sophia Southall

Signed, *Name,* Samuel Southall

Occupation (if any), Tea dealer

Place of Abode, Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient brother

Dated this 21st ~~do~~ Day of 10th mo

One Thousand Eight Hundred and Sixty ~~six~~ two.

To John Kitching M.D.

(c) Superintendent of the Retreat Yorks.

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

(c) Proprietor or superintendent of ——.
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

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

Name of Patient, with Christian Name at length	Sophia Southall
Sex and Age	female twenty nine
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious Persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Derwent Hill, Mr Shotley Bridge
Whether First Attack	do not distinctly remember
Age (if known) on First Attack	
When and where previously under Care and Treatment	at Wm Pumphrey's York
Duration of existing Attack	a few days
Supposed Cause	not known
Whether subject to Epilepsy	not that I know
Whether Suicidal	not recently
Whether Dangerous to others	not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sam Southall Leeds

Signed, *Name,* (e) Sam Southall

Occupation (if any), Tea dealer

Place of Abode, Leeds.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

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

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Allen
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the 21st day of October 1862
at (c) my house Petergate York
in the County of York separately from any other Medical Practitioner,
personally examined Sophia Southall
of (d) Derwent Hill near Shotley and that
the said Sophia Southall
is a (e) of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
appearance vacant and abstracted indisposed to answer questions yet confesses she is in the possession of fiends

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her brother state she fancies she has killed some person and is difficult to control or keep in her room from imaginary difficulties

Signed, *Name,* James Allen

Place of Abode, 16 Petergate York

Dated this 21st day of October One Thousand Eight Hundred and Sixty Two

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

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Henry Keyworth
being a (a) Member of the College of Surgeons of London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 21st day of October 1862
at (c) the York County Hospital
in the County of York separately from any other Medical Practitioner,
personally examined Sophia Southall
of (d) Derwent Hill near Shotley Bridge Northumberland and that
the said Sophia Southall
is a (e) Person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
her vacant appearance and general Expression with me she was quite ~~[illegible]~~ Silent and would not answer any question or speak

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I am told by her Brother she thinks that she has killed Dr Williams and that she is possessed of an evil spirit she is under the impression that she has committed Sins which in reality she has not

Signed, *Name,* Henry Keyworth

Place of Abode, 71 Micklgate York

Dated this 21st day of October One Thousand Eight Hundred and Sixty two

No 1028. Sophia Southall

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Sophia Southall was born a member of the Soc[y] of Friends

2. Where was the place of birth of the patient? Leominster, in Herefordshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

The only thing that might be deemed so described was what we now suppose to be very slight symptoms of morbid conscientiousness, at perhaps the age of 11 years.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

I am not aware that there was anything striking or peculiar about her, except what was mentioned stated above. She possessed good natural abilities

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

I should not say that anything more than ordinary attention was given to the mental cultivation of Sophia in early life; the affections understanding & affections were also well cultivated. She was taught by governesses at home till Midsummer her twelfth year when she was sent to the Wycombe Boarding School, kept by L. Backes where the instruction was very good. She spoke French readily, and had learnt

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Sophia S. has always been temperate and regular in her habits, and up to about the time of her becoming of age she she applied herself to her occupations with considerable industry.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She is unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

I should think this has ever been strikingly the case.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None - so far as I know.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and, if so, of what kind?

None that I am aware of.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

None

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

We have never been able to attribute it to any special cause - it took place about two years after the death of her father, and perhaps her mind was less long alone for long before mentally was unsettled. became more decidedly manifest at about that time - but I never believed it had been long [illegible] previously.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Thirty two & twenty.

15. What has been the duration of the present attack?

Only a few days.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Twice. The first attack lasting less than about one year, and the latter nearly three

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

The first ~~interval of sanity lasted more than~~ ~~I mean the second and the present~~ ~~The first attack was rather less~~ ~~Each interval of sanity has lasted~~ ~~one two years~~. The former ~~lasted~~, I think ~~about~~ might be looked upon as almost complete, in this second ~~attack~~ there was much remaining peculiarity.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Previous to the first attack of insanity the patient was for along period much depressed, she believed herself persecuted by religious principles, her correctness of ~~life~~ conduct was doubted by many her friends, that they did not appear to feel with her, ~~and~~ ~~that~~ ~~she~~ ~~was~~ ~~impressed~~ ~~with~~ ~~the~~ ~~thought~~ ~~of~~ ~~unknown~~ ~~temptation~~ and imagined that she had broken promises up to the period of her illness. There was nothing striking previous to the last attack.

19. What were the first decided symptoms of mental aberration?

A determination to destroy herself.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The last time she has been attacked it has been manifest by her refusing generally to speak, and taking no apparent notice of anything around her. By the expressing belief in various delusions, such as that she has killed Dr Williams, that she is under the influence of fiends, &c. There is no permanent delusion.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Not during the last attack. I do not remember that she has ever attempted violence to any one except herself at any time.

22. Has the patient shown any disposition to refuse food, or to injure ~~himself~~ herself, and if so, in what way?

Not this times.

23. What are the habits of the patient as regards personal cleanliness and decorum?

In usual health she has been correct in both these respects.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Her bodily health is not very strong, but I am not aware of any especial failing.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

First during the winter of 1854-5 she was for about 8 mos with at York in private lodgings under care of Caleb Williams. She returned to her friends in 1855 apparently quite restored, & remained with them till 1857 when she had a second attack and went again to lodgings at York under care of Dr Williams where she remained in the same place, lodging one night at Dr Williams & one night at a Lodging house until the time, in the early part of 1860, when beginning to be better she was removed to Burnsall House, where she remained till the 6th mo 1861, when she again returned to her friends partially recovered & has been with them till now.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

As she has been from the first under care of Dr Williams he will be best able to answer this question.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

We fear the disorder is increasing. There has been no intermissions since it first came on as that was so very recently, it may be unnecessary to answer the latter part of this question.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Samuel Southall
Tea Dealer
Leeds.

No 1029. Joseph Stephens.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Joseph Stephens whom I last saw at East Gate Taunton on the Fifteenth day of November (*) a (†) Person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Joseph Stephens

Signed, *Name,* Martha Stephens
Occupation (if any), Grocer &c
Place of Abode, Taunton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this Fifteenth Day of November One Thousand Eight Hundred and Sixty Two

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Joseph Stephens
Sex and Age	Male – 62 –
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Miscellaneous Shopkeeper
Religious Persuasion, as far as known	a Friend –
Previous Place of Abode	Taunton
Whether First Attack	No –
Age (if known) on First Attack	About 55
When and where previously under Care and Treatment ..	Not-all the last 4 months with at 6 months no stooge - Willesley Somerset
Duration of existing Attack	Not known
Supposed Cause	No –
Whether subject to Epilepsy	No Yes
Whether Suicidal	Not
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Martha Stephens Wife East Gate Taunton

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

Signed, *Name,* (*) Herbert Stevens for Martha Stephens
Occupation (if any), Wholesale
Place of Abode, Taunton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

81

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Francis Henry Woodforde being a (a) Graduate of Medicine of the University of Edinburgh & Licentiate of the Apothecaries Company and being in actual practice as a (b) Physician hereby certify that I, on the fifteenth day of November at (c) East Gate Taunton in the County of Somerset separately from any other Medical Practitioner, personally examined Joseph Stephens, Grocer of (d) East Gate Taunton and that the said Joseph Stephens is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) a sullen demeanour, manner, inability to attend to business, occasional violence to those about him, thinks all his affairs are going to ruin, that the goods in his shop are poisoned & various other delusions

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) His wife & son inform me that he has been very violent, & this day without provocation struck an intimate friend who came to see him

Signed, *Name,* Francis Henry Woodforde

Place of Abode, Fairwater House

Dated this fifteenth day of November One Thousand Eight Hundred and Sixty two

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Henry Lidden being a (a) Member of the College of Surgeons, London & a Licentiate of the Apothecaries' Company and being in actual practice as a (b) General Institutions hereby certify, that I on the fifteenth day of November at (c) East Gate Taunton in the county of Somerset separately from any other Medical Practitioner, personally examined Joseph Stephens - Grocer of (d) East Gate Taunton and that the said Joseph Stephens is a (e) Person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He hates God - & says He is a Devil & ought to be hanged, for having attempted suicide by Drowning & taking Poison

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) His Son informs me - that He says he must murder somebody

Signed, *Name,* Henry Lidden

Place of Abode, Chard Square Taunton

Dated this Sixteenth day of November One Thousand Eight Hundred and Sixty two.

No 1029.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

He was a member by birthright but lost his membership by marrying a person professing with friends but not a member

2. Where was the place of birth of the patient?

Bristol

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Delicate and sensitive early years

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

very inoffensive - not marked by any remarkable strength of passion or violent temper - but by any understanding

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No pecuniary of intellect

Bristol at first - He was educated at Stroat

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Shoe making - industrious - his conduct very temperate and regular during youth - as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at the age of 27 - 8 Children
8 Children eldest 36 - youngest 21 -

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

He has always been partial to gardening

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

About 30 yrs since he compounded with his creditors when he lost some property -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No -

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

It is believed not -

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

It is believed not -

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

No particular cause known.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About 35

15. What has been the duration of the present attack?

About 6 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

He has seldom passed a winter without his nervous system being more or less affected

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Yes. generally about Ten months

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Unusual elevation & depression of spirits - obstinate his health not materially affected - but slept little

19. What were the first decided symptoms of mental aberration?

Unusual elevation & depression

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Depression and fear - more particularly as regards his spiritual welfare.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

no - nor has he made any attack upon the life of any person

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He has shown a disposition to refuse food under the apprehension that abstinence was for the benefit of his health

23. What are the habits of the patient as regards personal cleanliness and decorum?

His habits are cleanly and decorus

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

He has been about 4 months at a private asylum but without beneficial results

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

He has been under medical care - but to no good effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary - lucid intervals at uncertain times

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Martha Stephens - Taunton
to whom accounts are to be sent

No 1030. Henrietta Rayner

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Henrietta Rayner whom I last saw at Sunderland on the twenty fourth day of November 1862 (a) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Henrietta Rayner

Signed, *Name,* ~~Ed~~ Edward Rayner
Occupation (if any), Ship Owner
Place of Abode, at Sunderland
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this twenty fourth Day of November One Thousand Eight Hundred and Sixty two

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Henrietta Rayner.
Sex and Age	Female. aged 60.
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Lady.
Religious Persuasion, as far as known	Church of England.
Previous Place of Abode	Sunderland.
Whether First Attack	No.
Age (if known) on First Attack	44 years.
When and where previously under Care and Treatment	The Retreat York.
Duration of existing Attack	All the Summer.
Supposed Cause	not known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Edward Rayner. Sunderland.

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

Signed, *Name,* (c) Edward Rayner
Occupation (if any), Ship Owner
Place of Abode, Sunderland
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

No 1030.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Dixon
being a (a) Member of the Royal College of Surgeons of England and Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Twenty Second day of November
at (c) No 27 John Street, Sunderland
in the County of Durham separately from any other Medical Practitioner,
personally examined Mrs Henrietta Rayner
of (d) Sunderland 27 John Street . . . . . and that
the said Mrs Henrietta Rayner
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f), Melancholy, Constant self reproach for extravagance in money matters both now and in former years, want of sleep at night. &c. &c. herself suggesting the necessity of being sent to an Asylum. that she had sinned beyond forgiveness.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Considerable excitement in the forenoon of the day accompanied by singing and dancing &c. &c. Has been an inmate on a former occasion,

Signed, *Name,* William Dixon
Place of Abode, 51 John Street, Sunderland, Durham

Dated this Twenty second day of November One Thousand Eight Hundred and Sixty two

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Davis
being a (a) Member of the Royal College of Surgeons of England and Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Twenty third day of November, 1862
at (c) 27 - John Street, Sunderland
in the county of Durham separately from any other Medical Practitioner,
personally examined Mrs Henrietta Rayner
of (d) 27 John Street, Sunderland and that
the said Mrs Henrietta Rayner
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f). Great despondency; Reproaches herself with having sinned beyond all forgiveness, also with reckless expenditure of Money; causeless fear of pecuniary embarrassment, restlessness while engaged in conversation.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g). Almost entire loss of sleep, frequent periods of Excitement.

Signed, *Name,* John Davis
Place of Abode, 50 North Bridge Street, Sunderland

Dated this Twenty third day of November One Thousand Eight Hundred and Sixty Two

No 1030. ~~Elizabeth Brankston~~ Henr^a Rayner

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Edward Rayner
27 John Street
Sunderland.

No 1031. Elizabeth Brankston.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing Particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The usual education given to young Ladies – at Boarding school.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 23 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. She has been overbearing, vain, & at times abusive. She has taken various fancies at different times e.g. that she would like to be a man, that love, marriage & children were wrong & objectionable, that Churches me "Devil's palaces" &c &c

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Clean, but eccentric in her dress.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Bodily health average

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Royal Edinr. Asylum since 23rd Sept. 1869. She is on the whole improved mentally, but varies from time to time. Never an approach to perfect recovery.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Residency in the house of a Medical man, & afterwards Asylum treatment.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

She is frequently worse ~~when~~ at her catamenial periods, especially when menstruation is not quite regular as was the case at one time. At present & for some time she has been regular in that respect.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

D. S. Sunnock Esqre 22 Chapel street
Belgrave Square
London
S. W.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Miss Elizabeth Brankston

whom I last saw at Morningside Edinburgh

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

on the twenty fifth day of October 1862 (a)
a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Elizabeth Brankston

Signed, *Name,* Lemmie Brankston
Occupation (if any), Lady
Place of Abode, Beechcroft Lodge Berwick Avenue Da
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this twenty sixth Day of December 1862.

One Thousand Eight Hundred and Sixty two.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Elizabeth Brankston
Sex and Age	Female, 27 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious Persuasion, as far as known	Protestant (Independent)
Previous Place of Abode	London
Whether First Attack	Yes
Age (if known) on First Attack	Ascribed to Typhus fever which she had when 19
When and where previously under Care and Treatment	Royal Edinburgh Asylum, since 23 Sept. 1859.
Duration of existing Attack	As stated
Supposed Cause	Typhus fever
Whether subject to Epilepsy	No
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Lemmie Brankston

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

Signed, *Name,* (c) Lemmie Brankston
Occupation (if any), Lady
Place of Abode, Beechcroft Lodge Berwick Avenue
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, David Skae M.D.
being a (a) Fellow of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (b) Physician
hereby certify that I, on the twenty third day of December
at (c) the Royal Edinburgh Asylum for the Insane
in the County of Edinburgh separately from any other Medical Practitioner,
personally examined Miss Elizabeth Brankston at present an inmate
of (d) the Royal Edinburgh Asylum and that
the said Miss Elizabeth Brankston
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
says it is wrong to eat animal food - it may go into ones children & give them a propensity to kill. Is silly in her conversation - her conduct is silly, & at times she is subject to fits of violence & excitement during which she swears and abuses everyone.

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

Signed, Name, David Skae M.D.
Place of Abode, Morningside, Edinburgh
Dated this twenty third day of December One Thousand Eight Hundred and Sixty two years

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, Thomas Smith Clouston
being a (a) Doctor of Medicine Edinr. University
and being in actual practice as a (b) Physician
hereby certify, that I on the twenty third day of December 1862
at (c) the Royal Edinburgh Asylum
in the county of Edinburgh separately from any other Medical Practitioner,
personally examined Miss Elizabeth Brankston at present
an patient in the Royal Edinburgh Asylum and that
the said Miss Elizabeth Brankston
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Her conversation which is silly and absurd. She told me that death was the result of the breaking of the harmonies of things. That marriage was wrong and that one of the principal causes of ill health in the world was that people had women to wife that she regarded as ladies, men as ladies in attending to religious services. Her behaviour, which is at times very much deranged, shows insanity in these and other ways. She takes periodic attacks of excitement, which when excited, is abusive & unmanageable.

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

~~Signed;~~ Name, T. S. Clouston M.D.
Place of Abode, Royal Edinburgh Asylum
Dated this twenty third day of December One Thousand Eight Hundred and Sixty two.

No 1032. Joseph Gregory

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Not a Member at present, was born to Membership.

2. Where was the place of birth of the patient? Clevedon, Yatton.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
no peculiar circumstances

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
received a plain education as a Friends school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
Served Apprenticeship to the Ironmongery business always of regular temperate habits.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Married at 32. four children 2 living the eldest if living would be 20 and the youngest is 11 years.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
yes. Father.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
No particular cause.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

Fifty two

15. What has been the duration of the present attack?

four months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was some visible tendency to depression and unsteadiness

19. What were the first decided symptoms of mental aberration?

Despondency and a want of decision in every thing he did.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Almost complete silence on every subject.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Occasionally violent but not dangerous.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

There was some disposition to refuse food, which has now ceased.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Neat and clean in his habits.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Good health at present

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Tonic and Alterative Medicine with change of scene. No effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary without any lucid intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

William Eddington

Watton.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Joseph Gregory whom I last saw at Wellington on the third day of first Month (*) a (*) a person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Joseph Gregory

Signed, *Name,* William Eddington
Occupation (if any),
Place of Abode, Yalton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle

Dated this 6th Day of 1st Month
One Thousand Eight Hundred and Sixty three.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Joseph Gregory
Sex and Age	Male. 52 years.
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Ironmonger
Religious Persuasion, as far as known	Plymouth brethren.
Previous Place of Abode	Yalton
Whether First Attack	First attack.
Age (if known) on First Attack	Fifty two
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	Four months.
Supposed Cause	unknown
Whether subject to Epilepsy	No
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none.
Name and Address of Relative to whom Notice of Death to be sent	William Eddington Yalton

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

Signed, *Name,* (c) William Eddington
Occupation (if any),
Place of Abode, Yalton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Reynolds
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 3rd day of Jany.
at (c) Fore St. Wellington
in the County of Somerset separately from any other Medical Practitioner,
personally examined Joseph Gregory
of (d) Fore St. Wellington, Ironmonger and that
the said Joseph Gregory
is a (e) Person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — The first symptoms exhibited were those of Despondency, every thing he did he repented of the next minute & became quite unfit for business, he is now refuses to hold any conversation & takes no interest in any thing about him.

Some time he refused food, but not at present —

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

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

At times, he is violent, in other respects like a child, requires assistance to dress & undress, the wants of nature require the same attention as those of a child

Signed, Name, Wm Reynolds
Place of Abode, Wellington, Somerset

Dated this 3rd day of Jany. One Thousand Eight ~~Sixty three~~ Hundred and Sixty three.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned George Kidgele
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Third day of January
at (c) Fore Street Wellington
in the county of Somerset separately from any other Medical Practitioner,
personally examined Joseph Gregory
of (d) Fore St Wellington Ironmonger and that
the said Joseph Gregory
is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) State
He is in a very desponding of mind apparently but I could get no reply to any questions I put to him

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
On questioning the man who has attended him during several months he describes him as generally in the state in which I found him seldom speaking tho' sometimes very violent & requiring restraint. He does nothing whatever for himself —

Signed, Name, George Kidgele
Place of Abode, Wellington Somerset

Dated this Third day of January One Thousand Eight Hundred and Sixty three —

No. 1033. Ann Cloak.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? By birthright.

2. Where was the place of birth of the patient?

Nottingham.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Had partial paralysis of left side at 3 mo. of age. Was been subject to Epileptic attacks since 12—

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Was less intelligent than usual from Early life.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Was at Ackworth School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

No occupation.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Yes—

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

None but the Epileptic fits above stated.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Epilepsy

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Her development has been Gradual.

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Is violent at times – but not dangerously so.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

She is not cleanly.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No –

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Cloak
Friar yard
Nottingham,

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Cloak,

whom I last saw at No 1 Park Street, Nottingham on the Eleventh day of Third Month One Thousand eight hundred and sixty three as a Patient into your House.

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

a (b) A person of unsound mind

Subjoined is a Statement respecting the said Ann Cloak

Signed, *Name,* James Cloak

Occupation (if any), Grocer

Place of Abode, Friar Yard, Nottingham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother.

Dated this Eleventh Day of Third Month

One Thousand Eight Hundred and Sixty Three

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Ann Cloak.
Sex and Age	Female 48
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	No occupation.
Religious Persuasion, as far as known	Member of Society of Friends.
Previous Place of Abode	Nottingham
Whether First Attack	No
Age (if known) on First Attack	12 years
When and where previously under Care and Treatment ..	In Ward at times since 12 yrs of age.
Duration of existing Attack	Epilepsy
Supposed Cause	By
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	James Cloak, Nottingham,

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

Signed, *Name,* (c) James Cloak

Occupation (if any), Grocer

Place of Abode, Friar Yard, Nottingham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Joseph White
being a (a) Member of the Royal College of Surgeons of Edinburgh & Licentiate of the Society of Apothecaries of London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Ninth day of March 1863
at (c) No 1 Park Street, Nottingham
in the County of Nottingham separately from any other Medical Practitioner,
personally examined Ann Cloak
of (d) No 1 Park St. Nottingham, Spinster (no occupation) and that
the said Ann Cloak
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She has difficulty & hesitation in answering questions, her memory is extremely imperfect, & she has all the appearance of a person suffering from imbecility arising from long continued Epileptic attacks—

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
By her cousin, Hannah Brown—
She is at times violent & obstinate to a degree indicative of unsound mind— She is restless at night & appears to see objects wh do not exist—

Signed, *Name,* Joseph White

Place of Abode, Regent St. Nottingham

Dated this Ninth day of March One Thousand Eight Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Francis Howitt
being a (a) Doctor of Medicine of St Andrews' University and a Member of the Royal College of Surgeons of London, &c
and being in actual practice as a (b) Surgeon &c
hereby certify, that I on the Tenth day of March One thousand, Eight hundred & sixty three—
at (c) No 1 Park Street Nottingham —
in the county of Nottingham separately from any other Medical Practitioner,
personally examined Ann Cloak (no occupation)
of (d) No 1 Park Street Nottingham, Spinster, and that
the said Ann Cloak
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She takes no notice of anything unless her attention be specially drawn to it— she appears to have no thought or reasoning power.— is extremely odd & stupid— has great difficulty in giving a name to anything— even to her personal friends— and has all the appearance of a demented person.—

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
From her brother James Cloak, and her Cousin Hannah Brown
She is extremely passionate, & at such times violent; lies on the floor, & will not go to bed, except by coaxing, or even force— Has no pride in respect to personal appearance, & takes no care to clean herself.

Signed, *Name,* Francis Howitt

Place of Abode, Shakespeare Street Nottingham.

Dated this Tenth day of March One Thousand Eight Hundred and Sixty Three.—

No 1034. Jane Townson

This Certificate supposed. being illegally executed.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She is a Member of the Society of Friends by birthright.

2. Where was the place of birth of the patient? Hartlington Lancashire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? No.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was intended at Ackworth School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? was with her relations was industrious - temperate - regular in her conduct.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. She was married at 23 - has had no family.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? She has experienced considerable domestic anxiety.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? She has been the subject of uterine heart disease.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? An elder Sister died insane ~~of an Epileptic~~

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Mental anxiety.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? in her 58th year.

15. What has been the duration of the present attack? Six weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? She laboured under considerable depression of spirits for some time previous to the present attack.

19. What were the first decided symptoms of mental aberration? Extreme depression of spirits, accompanied with expressions of her extreme poverty & lost condition.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Her lost & wicked condition, & a certainty of becoming a homeless wanderer. That nothing is paid for.

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure her~~himself~~, and if so, in what way?
She sometimes refuses food, but has no disposition to injure herself, yet she says she fears she shall.

23. What are the habits of the patient as regards personal cleanliness and decorum?
She requires much urging to wash & dress.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. She health is tolerably good. She has recently suffered from ulceration of the leg.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. —

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? —
She has been placed in lodging, in the country under the care of a nurse without benefit.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Her symptoms appear stationary.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
John Thwaite Spring Hill Rochdale
Benjamin Townson 55 Shaw Street Liverpool.
James Townson, Meadow Lane, Frammen, Rost & Terry Cheshire

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Townson

whom I last saw at Great George's Road Waterloo on the Eighteenth day of March instant (c)

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

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

Subjoined is a Statement respecting the said

Signed, *Name,* Benjamin Townson

Occupation (if any), Surgeon

Place of Abode, 55 Rose Street Liverpool

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother in Law.

Dated this Twentieth Day of March

One Thousand Eight Hundred and Sixty three.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Jane Townson
Sex and Age	Female - 57 to 58.
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Friend
Religious Persuasion, as far as known	Friend
Previous Place of Abode	Meadow Lane Rock Ferry Cheshire and 55 Great George's Road Waterloo.
Whether First Attack	Yes
Age (if known) on First Attack	-
When and where previously under Care and Treatment	-
Duration of existing Attack	Six weeks.
Supposed Cause	Mental Anxiety.
Whether subject to Epilepsy	No.
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	-
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	-
Name and Address of Relative to whom Notice of Death to be sent	James Townson Agent Meadow Lane Rock Ferry Cheshire

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

Signed, *Name,* (c) James Townson

Occupation (if any), Agent

Place of Abode, Meadow Lane, Rock Ferry, Cheshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as *the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Rottingham
being a (a) Fellow of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the fourteenth day of March 1863
at (c) York Place, Gt George House Waterloo
in the County of Lancaster separately from any other Medical Practitioner,
personally examined Jane Jonson wife of James Jonson
of (d) Meadow Lane, Rock Ferry, Cheshire, Agent, and that
the said Jane Jonson
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Incoherent Language: complaints of imaginary diseases — Dark dirty clothes in rags, & that every thing she eats is impaired to. Genial aspect — moody condition. wringing of hands &

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

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

Signed, *Name,* John Rottingham
Place of Abode, 20 Gt Crosshall St Liverpool

Dated this twenty first day of March One Thousand Eight Hundred and Sixty three.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as *the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Benjamin Jonnson
being a (a) Member of the Royal College of Surgeons, England
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Eighteenth day of March instant.
at (c) York Place, Gt George's house, Waterloo near Liverpool
in the county of Lancaster, separately from any other Medical Practitioner,
personally examined Jane Jonnson, wife of James Jonnson,
of (d) Meadow Lane Rock Ferry, Cheshire, Agent and that
the said Jane Jonnson
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She says she is lost and homeless - that nothing she eats is paid for - that she is filthy and in rags - That she will allow no one of the Relations to come - Sits moody & silent wringing her hands.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
In every case I am informed she is lost, & homeless - that nothing is paid for which she eats - Sits gloomy & silent & is unwilling to eat or wash herself
Communicated by Jones

Signed, *Name,* Benjamin Jonnson
Place of Abode, 58 Chapel Street Liverpool

Dated this Twentieth day of March One Thousand Eight Hundred and Sixty three.

No 1034. Jane Townson.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Townson wife of James Townson of Meadow Lane Rock Ferry Cheshire whom I last saw at St Georges House Waterloo near Liverpool on the twenty first day of March instant (c) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Jane Townson

Signed, Name, Benjamin Townson.
Occupation (if any), Surgeon
Place of Abode, 53 Chapel Street Liverpool
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Mother in law

Dated this Twenty Eighth Day of March
One Thousand Eight Hundred and Sixty three.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Jane Townson
Sex and Age	Female aged 58.
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Private life
Religious Persuasion, as far as known	A Friend
Previous Place of Abode	Meadow Lane Rock Ferry Cheshire
Whether First Attack	Yes
Age (if known) on First Attack	about 58.
When and where previously under Care and Treatment ..	—
Duration of existing Attack	About six weeks.
Supposed Cause	Domestic anxieties
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	James Townson Meadow Lane Rock Ferry Cheshire or Benjamin Townson 55 Chapel St Liverpool

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

Signed, Name, (c) Benjamin Townson
Occupation (if any), —
Place of Abode, —
Degree of Relationship (if any), or other circumstances of connexion with the Patient } —

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the twenty-seventh day of March
at (c) the house of Stephen Arnett - Belle Vue St
in the County of York separately from any other Medical Practitioner,
personally examined Jane Townson wife of James Townson - Agent
of (d) Meadow Lane Rock Ferry Cheshire - and that
the said Jane Townson -
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is depressed low & melancholic - imagining she has no friends, that no one cares for her

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
& answers questions in incoherently

Signed, *Name,* William Procter
Place of Abode, Petergate - York

Dated this 27th day of March One Thousand Eight
Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 27th day of March 1863
at (c) the house of Stephen Arnett Belle Vue Street York
in the county of York separately from any other Medical Practitioner,
personally examined Jane Townson the wife of James Townson
of (d) Meadow Lane Rock Ferry Cheshire - Agent and that
the said Jane Townson
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
A state of despondency which renders her unfit for the ordinary duties of life - a belief that she has neither home or friends an inability to sustain a conversation

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

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

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York

Dated this 27th day of March One Thousand Eight
Hundred and Sixty three

No 1035. Thos. E. Greathead

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A Member by Convincement — I.D.

2. Where was the place of birth of the patient? Says at Hull I.D.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Dont know —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? A want of education I.D.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? A Shoemaker of industrious habits & is believed to have been always temperate & ~~regular~~ I.D.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Has been about 12 yrs a widower — has a son living about 24 years old & several years since buried a son [illegible] 2 yrs or 10 older than surviving son I.D.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Religious —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Are increasing tendency to poverty & for some years unable without aid to support himself I.D.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? It does not appear

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? About 12 years ago he had stricture of the rectum. & he is now affected with prolapsus ani

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? It is not known I.D.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Loss of his wife, solitude, reduced circumstances, habit of smoking, & religious contemplation

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?
not until recently

15. What has been the duration of the present attack? Not less than four months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? It is believed to be the first attack but is naturally (or has usually shown) tenderness & mental weakness

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? It is understood that for some considerable time he has not slept & fule & has shown much depression

19. What were the first decided symptoms of mental aberration? Muttering wandering out at night insufficiently clothed phantoms of a religious nature

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Quickened pulse heat of head. pupil generally contracted dull stolid expression of countenance, extreme taciturnity & furred tongue

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?
He dreads or suspects he will be poisoned or burnt & this leads to a fear lest he should injure himself

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Generally he eats very little & requires much persuasion to eat sufficient for sustenance

23. What are the habits of the patient as regards personal cleanliness and decorum?
A carelessness in these respects

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. See answer to query No 20

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
Has been attended by J C Rix. M.R.C.S.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
The Workers of Manchester Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Thomas Eli Greathead whom I last saw at home 24 Melbourne Street Chorlton on Medlock Manchester on the Thirtieth day of Third month 1863 (a) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Thomas Eli Greathead

Signed, *Name,* Elijah Greathead,
Occupation (if any), Assistant at a Confectioner
Place of Abode, 24 Melbourne Street Chorlton on Medlock Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Son

Dated this Thirtieth Day of Third month (1863)
One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Thomas Eli Greathead
Sex and Age	Male - supposed to be nearly 60 yrs of age
Married, Single, or Widowed	A Widower
Condition of Life, and previous Occupation (if any)	Boot & Shoe Maker
Religious Persuasion, as far as known	A Friend
Previous Place of Abode	First at Hull - then Staffordshire Potteries & for some 30 yrs at Melbourne St Chorlton
Whether First Attack ... First attack	
Age (if known) on First Attack	4 to 6 months
When and where previously under Care and Treatment	Nowhere -
Duration of existing Attack	about 6 months (but failing in health for the last 12 months.
Supposed Cause	See answer to Query 13
Whether subject to Epilepsy	Not known
Whether Suicidal	Doubtful
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	See other side
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Elijah Greathead at Butterworths Confectioners - Downing St Ardwick

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

Signed, *Name,* (c) James Boyce
Occupation (if any), Stationer
Place of Abode, 76 Oldham Street Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Not Related but have known the patient for nearly 30 years

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

I, the undersigned, Wm White M.D.,
being a (a) graduate of the University of Edinburgh
and being in actual practice as a (b) Physician
hereby certify that I, on the twenty third day of 3d Month 1863
at (c) 24 Melbourne St Charlton upon Medlock Manchester
in the County of Lancaster separately from any other Medical Practitioner,
personally examined Thomas Greathead Shoemaker and that
of (d) 24 Melbourne St Charlton on Medlock
the said Thos Greathead
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Pulse 88 rather hard, vein turgid head hot memory bad, but he admits that he walked up & down the street muttering "middle heaven" that he knelt for two hours at the kitchen stopstone with his eyes & hands in one position & in fact in catalepsy.

2. Other facts (if any) indicating Insanity communicated to me by others (g) his attendant says he lighted two candles in daytime & when I asked him why? said it was to assist in prayer. that he said his medical attendant meant to poison him & other symptoms which denote religious aberration of mind

Signed, Name, William White M.D.

Place of Abode, 61 Chapman St Hulme Manchester

Dated this 24th day of 3d Month One Thousand Eight Hundred and Sixty three

The above & other considerations lead me to fear that softening of the brain may be supervening

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, as the case may be.—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

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

I, the undersigned, Charles James Rix.
being a (a) Member of the Royal College of Surgeons London. Licentiate of the Apothecaries Company & Licentiate in Midwifery & Surgeon.
and being in actual practice as a (b)
hereby certify, that I on the twenty sixth day of March 1863.
at (c) No 24 Melbourne St Charlton upon Medlock, Manchester
in the county of Lancaster separately from any other Medical Practitioner,
personally examined Thomas Greathead Shoemaker and that
of (d) Melbourne St Charlton upon Medlock.
the said Thomas Greathead
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) - Pulse quick - Head hot - Memory very bad - At one time in a confirmed state of restlessness walking up & down the House upstairs & down without any object - at other times sitting or standing for a length of time gazing upon vacancy not heeding the slightest noise of any questions put to him refusing food & medicine &c &c

2. Other facts (if any) indicating Insanity communicated to me by others (g) -
Lighting two candles - the middle of the day - seen burning by myself for the purpose of lighting his pipe - would have them placed burning in a Closet - in great dread of being poisoned - will strip all his clothes off in the Kitchen - Female neighbour present &c

Signed, Name, Charles James Rix

Place of Abode, 49 Rusholme Road, Manchester

Dated this 27th day of March One Thousand Eight Hundred and Sixty three

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, as the case may be.—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No. 1036. Margaret Knight

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? a friend by birthright

2. Where was the place of birth of the patient? London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Think not

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Quick & clever

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Educated at Croydon School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Book & shop keeping, Industrious & temperate, conduct rather variable

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married about 23 years of age, 2 children living & two not living. Eldest would have been seven; youngest is three years old.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Engaged with earnestness in most things undertaken.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No great change, reverse or success

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Fits or convulsions previous to two or three of the confinements

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? General good health previous to marriage

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? One Uncle now at the Retreat

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Not aware of any particular cause unless over exertion at business.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Thirty years of age

Twelve ago - poorly in mind - saying she had done everything wrong -

15. What has been the duration of the present attack?

about two months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Considiable elevation of spirits followed by depression two or three months previous. also very wakefull during early morning

19. What were the first decided symptoms of mental aberration?

self accusation

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

General idear of past guilt &c thinks it too late to improve, entertains a hope that past time will return to begin life again.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

For some time constantly refused food & has shown some indications of a wish to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

clean & decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Belly good now, has been much reduced from neglecting to take sufficient suitable food.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

never under care before

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

complete rest, change of air, nutritious food &c

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Rather increasing, generally better during the evening

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Lewis S Knight
J P Shudehill
Manchester

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Margaret Knight whom I last saw at Stanogate on the sixth day of fifth mo 1863 (c) a (b) person of unsound mind Patient into your House.

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

Subjoined is a Statement respecting the said Margaret Knight

Signed, *Name,* Lewis S Knight
Occupation (if any), General dealer
Place of Abode, 90 Shudehill Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this sixth Day of fifth month One Thousand Eight Hundred and Sixty 3

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Margaret Knight
Sex and Age	female aged 32 years
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	tradesmans wife
Religious Persuasion, as far as known	friend
Previous Place of Abode	Manchester
Whether First Attack	first attack
Age (if known) on First Attack	thirty
When and where previously under Care and Treatment	no-where
Duration of existing Attack	about two months
Supposed Cause	supposed over anxiety — only an attack of convulsions at time of confinement
Whether subject to Epilepsy	some reason to suppose so
Whether Suicidal	not at all —
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Lewis S Knight 90 Shudehill Manchester

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

Signed, *Name,* (c) Lewis S Knight
Occupation (if any), General dealer
Place of Abode, 90 Shudehill Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Andrew Scott Myrtle
being a (a) M. D. Edinr 1844 & L. R. C. S. Edinr
and being in actual practice as a (b) Physician & Surgeon
hereby certify that I, on the 5th day of May 1863
at (c) Silverfield Cottage, Harrogate.
in the County of York separately from any other Medical Practitioner, of 98 Shude hill
personally examined Margaret Knight wife of Lewis Knight
of (d) Manchester and that
the said Margt Knight
is a (e) a person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) expression of face fixed, eye unsteady, wandering, general restlessness and perpetual working with fingers of both hands, disinclination to answer questions, says she is very unhappy, is perfectly useless and never has been useful in this world, after answering any question continues muttering to herself, and seems anxious to escape from further interrogation

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) from Mother in Law that for years back she has observed a failure of the memory, latterly the temper has been variable, subject to periods of excitement and depression — Habits changed from being free almost extravagant to the reverse, so as to deny herself proper food &c once she secreted a Razor & with it in her pocket retired to the Watercloset where she locked herself in, my informant discovered her, went to the closet, got her to open the door, but she remained in said closet for more than an hour —

Signed, *Name,* Andrew Scott Myrtle M.D.
Place of Abode, Park Parade Harrogate

Dated this 5th day of May One Thousand Eight Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Frederick Bainbridge
being a (a) Member of the College of Surgeons England
and being in actual practice as a (b) Surgeon & General Practitioner
hereby certify, that I on the fifth day of May
at (c) Silverfield cottage Harrogate
in the county of York separately from any other Medical Practitioner, 98
personally examined Margaret Knight wife of Lewis S Knight of ~~Shudehill Manchester~~
of (d) Shudehill Manchester and that
the said Margaret Knight
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) self absorbed expression of face furtively avoiding answers to questions continued restless activity of her fingers rapid utterance & whispered chattering to herself on irrelevant matter &c

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her mother in law hinted that some fear had been entertained lest she sh^d destroy herself

Signed, *Name,* Fred Bainbridge
Place of Abode, York Place Harrogate

Dated this Fifth day of May One Thousand Eight Hundred and Sixty three

1037. : Susan Thompson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No,

2. Where was the place of birth of the patient?

Penrith Cont.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No,

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Endowed with more than ordinary abilities

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Rec.d a first class education, partly on the Continent & partly in England

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

No occupation — Perfectly temperate, Regular Conduct, but not particularly industrious

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at Forty nine, — No issue —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No. —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No. —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No. —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No. — Subject to headaches

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No. —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Unknown, but presented themselves a few months after Marriage

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

98

14. At what age was the patient first attacked with symptoms of insanity?

Between 49 & 50. —

15. What has been the duration of the present attack?

Between 4 & 5 years —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

— —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No, subject to boils. —

19. What were the first decided symptoms of mental aberration?

Sound of bells ringing in the ears. —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

anxiety respecting the validity of the marriage settlement

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No. —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

At the commencement of the malady objected to taking food

23. What are the habits of the patient as regards personal cleanliness and decorum?

Latterly a less regard to personal cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Health tolerable, bowels require attention occasionally

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

With Dr Winslow in the spring of 1859 for about a month
At the Crichton Instn from May 1859 to October 1861.
Since that period at home attended by a sister & has slightly improved under the last change having lost all delusions

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

None

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

No, rather improving but great excitement when required to rise from bed

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

J Thompson
Holloway House Penrith
Cumbd

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at Thos. Thompson Penrith

on the 19th day of May 1863. (a)

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

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

Subjoined is a Statement respecting the said Susan Thompson

Signed, *Name,* I Thompson

Occupation (if any),

Place of Abode, Holloway House, Penrith

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this 19th Day of May

One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Susan Thompson
Sex and Age	Female, age 54. —
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Gentlemen's
Religious Persuasion, as far as known	Protestant
Previous Place of Abode	Penrith
Whether First Attack	First
Age (if known) on First Attack	50. —
When and where previously under Care and Treatment	Dr Winslow's & Crichton Institn Mar 1859 to Oct 1861. —
Duration of existing Attack	4 or 5 years
Supposed Cause	Unknown —
Whether subject to Epilepsy	No. —
Whether Suicidal	No. —
Whether Dangerous to others	No. —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No —
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	I Thompson (as above)

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

Signed, *Name,* (c) I Thompson

Occupation (if any),

Place of Abode, Holloway House Penrith Cumbd

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Wm Thos Greaves being a (a) Member of the R. College of Surgeons of London and being in actual practice as a (b) Surgeon hereby certify that I, on the Nineteenth day of May 1863 at (c) Eamont Bridge Cottage – her place of residence – in the parish of Penrith in the County of Cumberland separately from any other Medical Practitioner, personally examined Susan Thompson of (d) Eamont Bridge Cottage, Penrith, aforesaid. Wife of John Thompson (Gentleman) and that the said Susan Thompson is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Moodiness of manner, sulky mode of answering by grunting – palpable idiotic expression of countenance ~~[illegible]~~

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Great occasional violence, general indisposition to move or be moved from bed, filthiness of habits therein – this evidence from her Sister Lady Briscoe & others.

Signed, *Name,* Wm Thos Greaves M.R.C.S. London

Place of Abode, Penrith

Dated this 19th day of May One Thousand Eight Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Robert Pearson being a (a) Doctor of Medicine of the University of Edinburgh a Member of the Royal College of Surgeons of England &c and being in actual practice as a (b) Surgeon hereby certify, that I on the nineteenth day of May 1863 at (c) Eamont Bridge Penrith in the county of Cumberland separately from any other Medical Practitioner, personally examined Susan Thompson wife of John Thompson of (d) Penrith Gentleman and that the said Susan Thompson is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Is moody & perverse, & obstinately refuses to answer questions

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Is at times violent & refuses to leave her bed – Lady Briscoe her sisting tells me this.

Signed, *Name,* Robert Pearson

Place of Abode, Shecklandgate Penrith

Dated this 19th day of May One Thousand Eight Hundred and Sixty three

1038. Tuffen West.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 31st day of May 1863, of Tuffen West. a Private Patient in Haydock Lodge ~~House~~, near Warrington, Lancaster to the Friends Retreat, York.

Given under our hands this 19th day of May in the year of Our Lord One Thousand Eight Hundred and Sixty three.

Robert Nairne
R W S Lutwidge
} Commissioners in Lunacy.

ORDER.

I,* William West the undersigned having Authority to discharge Tuffen West a Private Patient in Haydock Lodge ~~House~~ near Warrington, Lancaster hereby order and direct that the said Tuffen West be removed therefrom to the Friends Retreat, York.

Given under my hand this* 21st day of May in the year of Our Lord One Thousand Eight Hundred and Sixty three

(Signed) William West

Place of Abode 54, Hatton Garden E.C.

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

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

In cases of Chancery Patients—The Committee of the Person.

500 9 | 62—H & S
5831

100

1038

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

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

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

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

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

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

I, the undersigned, Robert Fowler
being a (a) Graduate in Medicine of Edinburgh: Member of the Roy: Coll: Surg^ns London & Lic: Soc: Apothecaries, London
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify, that I, on the 18 day of October 1862
at (c) Bethnall House
in the County of Midd^x: separately from any other Medical Practitioner,
personally examined Tuffen West
of (d) 85 Queen's Road, Dalston, Artist and that
the said Tuffen West
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Altho' I had never before seen him, he persisted in stating that he Knew me: having called on me in May last & did some sketching for me at the College of Surgeons: talks incessantly, & goes from one subject to another, rapidly in fact, exhibits great incoherence — Has a very high notion of his position in the Scientific World: considers himself

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

~~2. Other facts (if any) indicating Insanity communicated to me by others (g)~~
at the top of the tree in his profession and that he is in daily intercourse with all the Scientific men of the World at large.

Signed, *Name,* Robert Fowler

Place of Abode, 145 Bishopsgate. W. out

Dated this 18th day of October One Thousand Eight Hundred and Sixty Two.

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

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

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

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

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

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

I, the undersigned,
being a (a)
.
and being in actual practice as a (b)
hereby certify, that I on the day of
at (c)
in the County of separately from any other Medical Practitioner,
personally examined
of (d) and that
the said
is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

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

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

Signed, *Name,*

Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

I hereby Certify that the foregoing is a true copy of the Order & Medical Certificates on which Mr Tuffen West was admitted into this House on the 11th Day of December 1862. and that he is in a fit state of bodily health to be removed to The Friends Retreat, at York. ———

H. Rorke Ley
Med Superte

Haydock Lodge
May 30th 1863

No 1038.

NOTICE OF ADMISSION.

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

I hereby give you Notice, That

.

(a) House or hospital.

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

Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

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

Signed, _____

(c) _____

(c) Superintendent or proprietor of ———.

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

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

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Tuffen West

whom I last saw at Southend

on the 13th day of October 1862 (a)

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

Subjoined is a Statement respecting the said Tuffen West.

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

Signed, *Name,* Jonathan Hutchinson

Occupation (if any), Surgeon

Place of Abode, 4 Finsbury Circus

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Dated this 17th Day of October

One Thousand Eight Hundred and Sixty Three.

To Messrs Warburton & Co

(c) proprietors of (d) National House Asylum

(c) Proprietor or superintendent of ———.
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

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

Name of Patient, with Christian Name at length	Tuffen West.
Sex and Age	Mr. 39.
Married, Single, or Widowed	Widower
Condition of Life, and previous Occupation (if any)	artist
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	Dalston / Queen's Road
Whether First Attack	1st
Age (if known) on First Attack	39 years.
When and where previously under Care and Treatment	No where.
Duration of existing Attack	1 month.
Supposed Cause	Over head work — (hereditary)
Whether subject to Epilepsy	No
Whether Suicidal	Doubtful.
Whether Dangerous to others	Yes.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	Having broke his parole at his lodgings in the country & come up to town with mountain intent and being in a dangerous condition, as regards both himself and others.
Name and Address of Relative to whom Notice of Death to be sent	Theodore West. Diss, Norfolk.

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

Signed, *Name,* (e) Jonathan Hutchinson

Occupation (if any), Surgeon

Place of Abode, 4 Finsbury Circus

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, George Frederick Giles
being a (a) member of the Royal College of Surgeons . London & Licentiate of the Apothecaries Company
and being in actual practice as a (b) Surgeon .
hereby certify, that I, on the 17th day of October 1862
at (c) Clifton Villa Victoria Park Road, Hackney
in the County of Middx separately from any other Medical Practitioner,
personally examined Tuffen West, Artist,
of (d) I am informed he was residing at Southend and that
the said Tuffen West .
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) His conversation is very incoherent. He asked me if I knew Dr Forbes Winslow because he said he had married a flyaway frenchwoman who has sent all his patients to the Devil. or a Scotchwoman who takes care of his money. He said he was copying an important article from "Punch" on cotton: he was turning the leaves over writing a word or two from different parts:— he had "Punch" with him .

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

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

I am informed by his Brother in Law Mr J. Hutchinson that he escaped from the custody of his friends from Southend & had spoken of Suicide: This was told me on the above date .

Signed, *Name,* George Frederick Giles
Place of Abode, Victoria Park Road, Hackney
Dated this 17th day of October One Thousand Eight Hundred and Sixty Two.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Hughlings Jackson
being a (a) member of the Royal college of Physicians of London
and being in actual practice as a (b) Physician
hereby certify, that I on the 18th day of October 1862
at (c) Bethnal House
in the County of Middx: separately from any other Medical Practitioner,
personally examined Tuffen West
of (d) 85 Queens Road, Dalston, Artist and that
the said Tuffen West.
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is very incoherent in conversation: he has exaggerated ideas about his importance in the Scientific world:—he says he has no further trouble in carrying on his business. he has — he says — nothing to do but to boat & grout in a Yacht: this is quite contrary to the facts of his position .

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

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

Signed, *Name,* John Hughlings Jackson M.D. M.R.C.P.
Place of Abode, 5 Queen Square
Dated this 18th day of October One Thousand Eight Hundred and Sixty Two.

No 1038.

4, Finsbury Circus, E.C.

May 6 1864

I hereby certify that I have frequently seen Tuffen West during the last three months and that he appears to be to be perfectly restored as regards his mental health I am of opinion that his name should be removed from the "Retreat" lists

Jonathan Hutchinson

F. R. C. S.

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No 1039. Elizabeth Walton

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Walton whom I last saw at Bush Road, Chadderton. on the ~~30th~~ 5th day of ~~June~~ June 1863. (*)

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

a (*) person of unsound as a Patient into your House.

Subjoined is a Statement respecting the said Elizabeth Walton

Signed, *Name,* John Walton
Occupation (if any), Cotton Spinner
Place of Abode, Middleton Road Chadderton
Degree of Relationship (if any), or other circumstances of connexion with the Patient A Brother

Dated this 5th Day of June
One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Elizabeth Walton
Sex and Age	Female aged Thirty nine
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	been living on a small independance
Religious Persuasion, as far as known	Member of the society of Friends
Previous Place of Abode	Bush Road Chadderton Nr Oldham
Whether First Attack	First attack
Age (if known) on First Attack	uncertain
When and where previously under Care and Treatment	nowhere
Duration of existing Attack	uncertain
Supposed Cause	unKnown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	no
Name and Address of Relative to whom Notice of Death to be sent	John Walton

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

Signed, *Name,* (*) John Walton
Occupation (if any), Cotton Spinner
Place of Abode, Middleton Rd Chadderton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Henry Hollyard Surgeon Stock Bridge
being a (a) Fellow of the Royal College of Surgeons of England
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the Thirtieth day of May 1863
at (c) Bee Cottage, Brook Road, Cheetham
in the County of Lancaster separately from any other Medical Practitioner,
personally examined Elizabeth Walton
of (d) Brook Road, (Spinster) and that
the said Elizabeth Walton
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Incoherent statements and destruction
of portions of her dress in my presence.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Disarrangement of food, furniture and dress;
also violent and unmanageable actions.

Signed, Name, Henry Hollyard
Place of Abode, King Street, Cheetham

Dated this 30th day of May One Thousand Eight
Hundred and Sixty Three

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles Murray.
being a (a) Member of the Royal College of Surgeons London.
and being in actual practice as a (b) general practitioner
hereby certify, that I on the Third day of June 1863.
at (c) Brook Road. Cheetham.
in the county of Lancaster separately from any other Medical Practitioner,
personally examined Elizabeth Walton.
of (d) Brook Road Spinster. and that
the said Elizabeth Walton
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds: viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) When examined her Answers were strange & unrelated. She was dressed up. Last Night running away & laughing occasionally she clasped her hands & looked as if praying & sleep. She answered questions very intelligently at times intermittently & in other instances gave no answer at all She was very restless. She said that she had ordered a new double cup & was going to Heaven for it. But on telling her she had only to be thankful & to remain & Residence of the Nurse. She then remarked that the colour of the sheep were white.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
She is subject to fits of great excitement during which she destroys her Clothes & anything that comes within her reach.
(Communicated by the Nurse in attendance upon the patient)

Signed, Name, Charles Murray M.R.C.S.
Place of Abode, Brook Road Cheetham

Dated this 4th day of June One Thousand Eight
Hundred and Sixty Three

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? In Membership by birthright

2. Where was the place of birth of the patient? Oldham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? When a girl fond of religious reading and books of that kind

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Exceedingly impatient under correction or contradiction

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? No instruction except that got in a common school in Oldham

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Worked in a cotton Mill some years in Youth and not much proficiency in Industry.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Never Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Became Wilfull &c.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Lost some money not very large in itself but perhaps might seem so to Her

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Hysteric Fits

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Through Confinement in the House and perhaps other causes Her general health not very high

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? I Believe an Uncle of Hers died at York Retreat but I cannot give particulars. She had also a Sister afflicted with disorder Nerves but got well again on being much in the open air

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Supposed to be real & fancied grievances

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Cannot answer correctly because she was under the care a Sister now deceased Her Parents also are deceased with whom she lived until nearly this

15. What has been the duration of the present attack? — Perhaps a year or may be near 2 yea

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Whatever of the disorder she may have had nothing worse came of it that a passionate outbreak of temper but now a new feature is seen viz. Burning her clothes Bed linnen Furniture &c &c

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? By Her living so much with others now deceased I cannot speak correc

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Of an irritable temp from youth —

19. What were the first decided symptoms of mental aberration? Spending money recklessly, and Religion a Recluse

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. She supposes she is a Lady of consequence and ought not to be denied anything she wishes

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Prone to destroy clothing &c as mentioned above but never actually injured any Person only Threatened them occasionally.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Sometimes refused food & destroyed the same in presence of the Person offering it.

23. What are the habits of the patient as regards personal cleanliness and decorum? Pretty good —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. From the manner of eating her meals she appears not to ail much.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Not in any hospital or asylum up to this time

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? Being of a very wilful disposition Her friends did not like to use any coersive means She seemed to resent it so much

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? The disorder appears to be increasing. Though for some short space she appears not to ail very much

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? For the present until further notice To John Walton
Middleton Road
Nr Oldham
Lancashire

No 1040. Mary E Salome

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is ~~he (or~~ she) in any way connected with the Society of Friends? Father a Jew Mother a Christian, the former a Deacon of Hebrew in rudy circumstances. She was adopted by a member of the Society of Friends when about 9 years of age, when about 24 she, at her own request became a member of the Society of Friends, whose membership she resigned in 1856.

2. Where was the place of birth of the patient?
It is believed she was born in Bristol

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? There was nothing peculiar either in her mental or physical circumstances up to the age of 14 beyond being particularly intractable — secretive & haughty, but affectionate & gentle in manner.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
No decided eccentricity, good natural understanding without precocity.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? After 9 years of age her understanding & affections were ~~not~~ cultivated. Her education was partly conducted at home for 2 years she was at a Boarding School.

6. To what occupation was the patient brought up; and what were ~~his (or~~ her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
Her health permitted she was to have been qualified for a Governess — Her habits have always been domestic, without marked singularity

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
She has never been married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has ~~his~~ her conduct ever exhibited a strong bias in any direction?
No — nor has she ever shewn any intellectual bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
She has never been subjected to any pecuniary embarrassment, nor to any disappointment or remarkable success.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? She was afflicted with Scrofulous abscess in her right hand & arm from the age of 14 to 21 at which time the arm was amputated — there was then a gradual restoration to apparently good health, but some diminution of muscular power & hardness to habitual eccentricity

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Her only own sister died of consumption, she had a vigorous mind & excitable temperament — No instance of insanity is known in the family

13. What are supposed to be the causes (remote and immediate) of the ~~first~~ attack, ~~and what those of the subsequent and last attacks of mental disorder~~?
There has been a good deal increase of eccentricity, but no evident insanity until quite recently —

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? The age of 47

15. What has been the duration of the present attack? Since the 7th instant

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

There were no previous attacks

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

The aberration has been very gradual— She now sleeps but very little.

19. What were the first decided symptoms of mental aberration? The belief that many persons are maliciously disposed towards her

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The idea that her food is poisoned, & that she is the rightful heir to a large estate, which is unjustly withheld from her.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? She has not shewn any disposition to violence either towards herself or others. Nor to destroy anything.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She usually takes a sufficiency of food, but often refuses some things from an apprehension of poison

23. What are the habits of the patient as regards personal cleanliness and decorum?

She is clean in her person and behaves with decorum

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. She has a weak digestion — and complains of an uneasy sensation in her head and stomach

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has not ever been under such care

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Her mental condition has not been such as to require medical care.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The recency of the attack has admitted of but little opportunity of observing the change of symptoms

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Hannah Christiana Price 12 South Parade, Clifton, Bristol

Hannah Christiana Price

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Esther Salome till within a few days residing at Cheltenham whom I last saw at my House on the Sixteenth day of June 1863 (*) as a Patient into your House.

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

Subjoined is a Statement respecting the said Mary Esther Salome

Signed, *Name,* Hannah Christiana Price

Occupation (if any), _____

Place of Abode, No 12 South Parade, Clifton, Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient Not a relation

Dated this Sixteenth Day of June 1863

One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Mary Esther Salome
Sex and Age	Female 47 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentel Dependant
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Cheltenham
Whether First Attack	First attack
Age (if known) on First Attack	Forty seven
When and where previously under Care and Treatment	
Duration of existing Attack	Ten days
Supposed Cause	Perhaps scrofulous disease
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Hannah C. Price — a friend but not a relation

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

Signed, *Name,* (c) Hannah Christiana Price

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Budd, being a (a) Physician and Doctor of Medicine of the University of Edinburgh — and being in actual practice as a (b) Physician hereby certify that I, on the sixteenth day of June — 1863. at (c) No 12 South Parade, Clifton in the County of the City of Bristol separately from any other Medical Practitioner, personally examined Mary Esther Salome, of (d) Cheltenham, and that the said Mary Esther Salome, is a (e) person of unsound mind, and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — A conservation in which she informed me that she was being subjected to slow poisoning by secret enemies: — perhaps Roman Catholics, she having once while in a Railway train, ~~[illegible]~~ spoken strongly against Roman Catholics or if not by Roman Catholics by a near relative, on account of property. By her producing from her pocket in confirmation of her belief a large accumulation of various articles of diet — sandwiches, cocoa, sugar &c. &c. — all of which she believed to contain poison.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Numerous facts to the same purport as the above, together with other facts indicating irrational conduct, communicated by Hannah C. Price, of 12 South Parade, Clifton —

Signed, *Name,* William Budd.

Place of Abode, 13 Lansdowne Place. Clifton —

Dated this sixteenth day of June One Thousand Eight Hundred and Sixty three —

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Joseph Griffiths Swayne being a (a) Physician and Doctor of Medicine of the University of London and being in actual practice as a (b) Physician hereby certify, that I on the sixteenth day of June 1863 at (c) the Elms Cotham Road near Bristol in the county of Bristol separately from any other Medical Practitioner, personally examined Mary Esther Salome of (d) Cheltenham and that the said Mary Esther Salome is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She called on me last week & showed me a package of sandwiches which she wished me to examine & stated that she believed they contained poison administered by some person or persons at the house where she lodged, and at the instigation of others who wished to obtain some property to which she might become entitled — In my conversation with her today she reiterated the same statements.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) She stated to some of her friends that her father was a great prophet & that he prophesied that when an English Prince married a Danish Princess, something would come out respecting her property — This statement was communicated to me by Joseph & Sarah Davis, of the Elms, Cotham near Bristol —

Signed, *Name,* Joseph Griffiths Swayne

Place of Abode, 1 York Place Clifton

Dated this sixteenth day of June One Thousand Eight Hundred and Sixty three.

No. 1041. Deborah Atkinson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

a member by birthright

2. Where was the place of birth of the patient?

Stockton on Tees

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

about 26.

15. What has been the duration of the present attack?

18 months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

believes herself possessed with an evil spirit.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

is not very violent.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has refused food but shows very little disposition to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

tolerably cleanly.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

appear to be increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Darlington Monthly Meeting. Qe may be sent to

John Dodshon.
Stockton

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Deborah Atkinson.

whom I last saw at Stockton.

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

on the Eighteenth day of June 1863 (a)

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

Subjoined is a Statement respecting the said Deborah Atkinson.

Signed, *Name,* John Dodshon

Occupation (if any), Wholesale Grocer

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient a friend of the Patient

Dated this eighteenth Day of June

One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Deborah Atkinson
Sex and Age	female - age 53 on the 9th of June 1862
Married, Single, or Widowed	single -
Condition of Life, and previous Occupation (if any)	Schoolmistress - & domestic employment -
Religious Persuasion, as far as known	member of the Society of Friends
Previous Place of Abode	Stockton.
Whether First Attack	Fourth attack -
Age (if known) on First Attack	30 years ~~old~~ -
When and where previously under Care and Treatment ..	at the Retreat - York -
Duration of existing Attack	abut 18 months
Supposed Cause	
Whether subject to Epilepsy	no.
Whether Suicidal	no - or very slight indeed -
Whether Dangerous to others	scarcely so -
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mary Atkinson Thistle Grove - Stockton -

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

Signed, *Name,* (c) John Dodshon

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Charles Trotter being a (a) Fellow of the Royal College of Surgeon & Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon Apothecary hereby certify that I, on the 17th day of June 1863 at (c) Thistlegreen Stockton in the County of Durham separately from any other Medical Practitioner, personally examined Deborah Atkinson of (d) Thistlegreen Stockton and that the said Deborah Atkinson is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Great restlessness with disposition to be violent tearing the work from her sister & otherwise conducting herself in an unusual manner

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) by her sister that at times she is violent & has attempted to strike with the Poker.

Signed, *Name,* Charles Trotter
Place of Abode, Stockton on Tees

Dated this 19th day of June One Thousand Eight Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Hutchison Whitewood being a (a) Doctor of Medicine of Medicine of Edinburgh & Licentiate of the College of Surgeons of Edinburgh and being in actual practice as a (b) Surgeon hereby certify, that I on the Nineteenth day of June at (c) ~~Stockton~~ Thistle Green Stockton in the county of Durham separately from any other Medical Practitioner, personally examined Deborah Atkinson of (d) Thistle Green Stockton and that the said Deborah Atkinson is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Wild restless manner, & saying she is possessed of an evil spirit

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) She is at times inclined to be violent

Signed, *Name,* James H Whitewood
Place of Abode, Stockton on Tees

Dated this 19th day of June One Thousand Eight Hundred and Sixty three

1042

Lucia Bateson

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 31st day of July 1863, of Lucia Bateson a Private Patient in Liverpool ~~House~~ Lunatic Hospital to the Retreat ~~House~~, York.

Given under our hands this 2nd day of July in the year of Our Lord One Thousand Eight Hundred and Sixty three.

B. W. Procter,
Robert Nairne
} *Commissioners in Lunacy.*

ORDER.

I,* the undersigned having Authority to discharge Lucia Bateson a Private Patient in Liverpool ~~House~~ Lunatic Hospital hereby order and direct that the said Lucia Bateson be removed therefrom to the Retreat ~~House~~, York.

Given under my hand this* 4th day of July in the year of Our Lord One Thousand Eight Hundred and Sixty three.

(Signed) F. S. Bateson

Place of Abode Mold.

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

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

In cases of Chancery Patients—The Committee of the Person.

500 9|62-11 & 8
5831

111

1042 Lucia Bateson

NOTICE OF ADMISSION.

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

I hereby give you Notice, That

was admitted into this Asylum as a Private Patient, on the . Day of 186 and I hereby transmit a Copy of the Order and Statement and Medical Certificate on which she was received (*a*).

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

1863. July 9th

I certify that the enclosed is a correct Copy of the order and Medical Certificates for Lucia Bateson.

Signed, [signature]

(*b*) Clerk of——Asylum. (*b*) [signature] Clerk to the Superintendents

Dated the Day of

One Thousand Eight Hundred and Sixty

To the _____

Lunatics 11.
(16 & 17 Vict. c. 97, Sched. F.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (F) No. 2.

I, the undersigned, hereby request you to receive Miss Lucia Bateson

whom I last saw at Newlands, Lisoure, Cheshire

on the Eighth day of March 1863. (a)

a (b) person of unsound Mind as a Patient into your Asylum.

Subjoined is a Statement respecting the said Lucia Bateson

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

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

Signed, Name, Y. S Bateson

Occupation (if any), Cotton Spinner

Place of Abode, Mold

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Brother

Dated this Eighth Day of March

One Thousand Eight Hundred and Sixty Three

To Dr Stark

(c) Describing the asylum.

Superintendent of the ~~Asylum for the~~ (c)

Liverpool Lunatic Hospital

STATEMENT.

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

Name of Patient, with Christian Name at length	Lucia Bateson
Sex and Age	Female aged 41 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gluttonman
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Newlands, Lisoure Cheshire
Whether First Attack	not by several
Age (if known) on First Attack	seventeen years
When and where previously under Care and Treatment	The Brook- York & Walton.
Duration of existing Attack	a weeks
Supposed Cause	Distress caused by her Fathers death
Whether subject to Epilepsy	no
Whether Suicidal	yes
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	Mrs Weybergh 3 Bedford St. Co. Liverpool and Y. S Bateson Mold

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

Signed, Name, (d) Y. S Bateson

Occupation (if any), Cotton Spinner

Place of Abode, Mold

Degree of Relationship (if any) or other circumstances of connexion with the Patient } Brother

1863. Lu
Lunatic
Hospital

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.

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

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

(d) *A. B. of——. Insert residence and profession, or occupation (if any).*

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

I, the undersigned, Isaac Byerley being a (a) Fellow of the Royal College of Surgeons & a Licentiate of Apothecaries Hall London and being in actual practice as a (b) Surgeon hereby certify, that I, on the Eighth Day of March 1863. at (c) Newlands, Liscard in the County of Chester separately from any other Medical Practitioner, personally examined (d) Lucia Bateson - Gentlewoman of Newlands, Liscard and that the said Lucia Bateson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Want of sleep - Mental despondency - self accusation upon religious points - States her conviction that something dreadful is about to happen - Have previously attended her in similar attacks

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Has had similar attacks on several occasions as stated by her relatives in two of which I have seen her - Communicated by her Mother -

Signed, *Name,* Isaac Byerley F:R:C:S L:A:C

Place of abode, Seacombe - Cheshire

Dated this Eighth Day of March One Thousand Eight Hundred and Sixty Three -

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MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.

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

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

(d) *A. B. of ——. Insert residence and profession, or occupation (if any).*

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

I, the undersigned, Thomas Batty being a (a) Member of the Royal College of Surgeons & Licentiate of Apothecaries Hall London and being in actual practice as a (b) Surgeon hereby certify, that I, on the Eighth Day of March 1863. at (c) Newlands, Liscard in the County of Chester separately from any other Medical Practitioner, personally examined (d) Lucia Bateson Gentlewoman of Newlands, Liscard and that the said Lucia Bateson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Mental delusions on religious subjects, stating that she has no hope of salvation, desponding mania -

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

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

None

Signed, *Name,* Thomas Batty

Place of Abode Liscard

Dated this Eighth Day of March One Thousand Eight Hundred and Sixty Three -

1863. July 9th
I certify that Miss Lucia Bateson is in a fit state of health to be removed to the Patients. Yours
P.W. Stark M.D.

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No 1043. Mary Gilmore

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

By convincement – also the granddaughter of a Friend on maternal side

2. Where was the place of birth of the patient?

Bridgewater –

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

as a child very precocious – and decidedly clever –

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

was liberally educated at a Friends school in Bridgewater

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Brought up as a Governess – Kept school in Bridgewater for some years. During youth was industrious – temperate & remarkably religious – and subsequently was a Minister among st Friends for some 15 or 20 years –

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

never married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

A school mistress for many years – and religion always occupied very much of her attention –

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Religious Excitement & too free use of Stimulus.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

when about 69 years old

15. What has been the duration of the present attack?

about a fortnight

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

about 3 months ago was in a very low and desponding state at the time believing herself to be in Hell – but speedily recovered – no medical aid called in ——

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

---

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

About 3 months ago became very deficient in mind thinking she would be lost – together with want of sleep and great restlessness – since this time has been great elevation of spirits going about the house singing hymns –

19. What were the first decided symptoms of mental aberration?

On Wednesday July 8th about 5 AM. Attempted to get out of her bedroom window – was opened by some policemen who she told that she had been poisoned a third day by Mrs Beer & Miss Hunt ——

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

States that she has frequent visions of the almighty and that he reveals things to her – Believes that her friends wished to poison her – at another time intended to suffocate her —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

One bit the finger of Mrs Beer who was preventing her escaping at the front door

22. Has the patient shown any disposition to refuse food, or to injure ~~himself~~ herself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Somewhat dirty in her habits – her bedroom especially so – presents a complete scene of confusion –

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

None with the exception of an opiate and a composing draught at night –

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Very much less excited than when first attended – but still not to be depended on – Only the night before last escaped into the street half dressed – was brought back again by a man who saw her in that condition followed by a crowd of some 30 or 40 persons.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Edmund Gulmore of Frome – Somerset –

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Gilmore —— whom I last saw at 25 Trinity Road – New Town – Bristol — on the Eighth day of July — 1863 — (*) a (†) pauper lunatic as a Patient into your House.

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

Subjoined is a Statement respecting the said Mary Gilmore.

Signed, *Name,* James Edward Gilmore
Occupation (if any), Draper
Place of Abode, Frome Somerset
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Thirteenth Day of July
One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Mary Gilmore
Sex and Age	Female - 69 years old
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Schoolmistress
Religious Persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	25 Trinity Road Bristol
Whether First Attack	1st Attack.
Age (if known) on First Attack	69 years
When and where previously under Care and Treatment ..	
Duration of existing Attack	about a fortnight
Supposed Cause	Religious excitement & partaking too freely of Stimulants
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	James Edward Gilmore – Frome – Somerset

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

Signed, *Name,* (*) James Edward Gilmore
Occupation (if any), Draper
Place of Abode, Frome Somerset
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Prince Challacombe
being a (a) Doctor of Medicine of the University of Edinburgh,
and being in actual practice as a (b) General Practitioner -
hereby certify that I, on the Eleventh day of July - 1863 -
at (c) 25. Trinity Road - New Town
in the County of Bristol - separately from any other Medical Practitioner,
personally examined Mary Gilmore
of (d) 25 Trinity Road - New Town — - and that
the said Mary Gilmore
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Great restlessness & excitability of manner - loans of sleep - told me that her friends designed to murder her & afterwards to put her baby down the closet - God had revealed this to her - frequently has visions & revelations from Heaven - generally goes about the house only half dressed & wears stockings with the feet cut off.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Although requested not to do so - talk to speak in meeting offering to the visions (Mary Watt & Eliza Borden) Mrs Beer & Mrs Hanks informed me of her going into a shop repeatedly & asking for brandy - *

Signed, Name, John P. Challacombe M.D.
Place of Abode, 25 King Square - Bristol
Dated this Eleventh day of July One Thousand Eight Hundred and Sixty three.

* drunk up quarter of a bottle of brandy & asked for more - then returned home sending to her landlady's room where she drank & emptied a glass of brandy & water which was on the mantle-piece -

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Alfred Burleigh
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Twelfth day of July 1863.
at (c) 25 Trinity Road, Redcliffe
in the County of Bristol separately from any other Medical Practitioner,
personally examined Mary Gilmore
of (d) 25 Trinity Road, Newtown, Spinster and that
the said Mary Gilmore
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Labours under delusions, thinks of seeing visions & hearing voices. is dirty in her person & rooms, is only partially dressed & occasionally in this state, believes her friends ill-use her.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Believed habitually excites from the use of drinks immoderately spirits & otherwise miscondust herself. (Miss Hanks and Mrs Beer. informants)

Signed, Name, Alfred Burleigh
Place of Abode, Cotham Road Bristol
Dated this 12th day of July One Thousand Eight Hundred and Sixty three.

Asylum, Boothams, York. No 1044.

~~York Lunatic Hospital.~~ Isabella J Taylor

16 and 17 Vict., Chap. 96; and 25 and 26 Vict., Chap. 111.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

~~Sched. (A) No. 1, Sects. 4, 8.~~ 8 & 9 Vict Sect 45. Sc B. with Medical Certificates Sec C

I, the undersigned, hereby request you to receive Miss Isabella Jane Taylor of Newton near Wakefield ~~whom I last saw at~~

~~on the~~ ~~day of~~ (a)

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

Subjoined is a Statement respecting the said Isabella Jane Taylor

Signed, *Name,* Edwd Taylor

Occupation (if any), No occupation

Place of Abode, Newton Lane End near Wakefield

Degree of Relationship (if any) or other circumstances of ~~connexion~~ connected *with the Patient,* Father of the Patient.

Dated this Twenty second Day of June

One Thousand Eight Hundred and ~~Sixty~~ fifty three.

To Dr Edward Simpson the Resident Medical Officer and Superintendent of the York Lunatic Hospital commonly known as the York Asylum.

STATEMENT.

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

Name of Patient, ~~and~~ with Christian Name, at length	Isabella Jane Taylor
Sex and Age	Female - 27
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No occupation
~~The~~ Religious Persuasion, as far as known	Church of England
Previous Place of Abode	York, Acomb, Leeds
Whether First Attack	Yes
Age (if known) on First Attack	21
~~When and where previously under Care and Treatment~~ Previous Place of confinement (if any)	None
Duration of existing Attack	Six years
~~Supposed Cause~~	
Whether subject to Epilepsy	No
Whether Suicidal or ~~Whether~~ dangerous to others	Not suicidal but disposed to injure others when excited
Whether found Lunatic by Inquisition, and Date of Commission ~~or Order for Inquisition~~	No
Special Circumstances (if any) preventing the Patient being examined before Admission separately by Two Medical Practitioners	None
~~[illegible]~~ Special circumstances (if any) preventing the insertion of any of above particulars	—

Signed, *Name,* as above Edwd Taylor

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

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient,

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

I certify this to be a true Copy of the order and Medical Certificates upon which Isabella Jane Taylor was admitted into the York Lunatic Hospl. Aug 24th 1863. Signed Ed Medham. M.D. Superintendent

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

I, ~~the undersigned~~, Joseph J Bennett being a (a)
Surgeon &c duly authorised to practice as such,
~~and being in actual practice as a~~ (b)
hereby certify, that I, ~~on the~~ have this day ~~of~~ ~~in~~ (c)
~~in the County of~~
separately from any other Medical Practitioner,
visited & personally examined (d) Isabella Jane Taylor the person named in the accompanying
~~a~~ Statement & order
and that the said Isabella Jane Taylor is ~~a~~ (e) of unsound mind
and a proper Person to be ~~taken charge of and detained under Care and Treat-~~
confined ~~ment~~, and that I have formed this opinion ~~upon~~ from the following facts, viz.:—
1. ~~Facts indicating Insanity observed by myself~~ (f) a frequent disposition to injure others—
to destroy her clothes & break windows
~~2. Other Facts (if any) indicating Insanity communicated to me by others~~ (g)

Signed, Name J. Bennett
Place of Abode, Wakefield
~~Dated this~~ ~~Day of~~ June 22nd One Thousand
Eight Hundred and ~~Sixty~~ 53.

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

I, ~~the undersigned~~ Edward Allen being a (a)
Surgeon duly authorised to
~~and being in actual~~ practice as ~~a~~ (b) such
hereby certify, that I, ~~on the~~ have this day ~~of~~ separately from any other
Medical Practitioner visited and ~~in the County of~~
~~separately from any other Medical Practitioner~~,
personally examined (d) Isabella Jane Taylor the person named in the accompanying
~~a~~ Statement & order
and that the said Isabella Jane Taylor is ~~a~~ (e) of unsound mind —
and a proper Person to be ~~taken charge of and detained under Care and Treat-~~
confined + ~~ment~~, and that I have formed this opinion ~~upon~~ from the following facts, viz.:—
1. ~~Facts indicating Insanity observed by myself~~ (f) From breaking windows, injuring
herself & others & from her general appearance & manner
(× she has no suicidal tendency)
~~2. Other Facts (if any) indicating Insanity communicated to me by others~~ (g)

Signed, Name Edward Allen
Place of Abode, 19 St Saviourgate, York.
Dated this 23rd Day of June One Thousand
Eight Hundred and ~~Sixty~~ Fifty three.

(a) *Here set forth the qualification entitling the Person certifying to practice as a Physician, Surgeon, or Apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.
(b) Physician, Surgeon, *or* Apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like Particulars.*
(d) *A.B. of* ———, *insert residence, or profession, or occupation (if any).*
(e) Lunatic, *or* an Idiot, *or* a Person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

1044.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 31st day of August 1863, of Isabella Jane Taylor a Private Patient in York Lunatic Hospital to the Retreat Hospital York.

Given under our hands this 3rd day of August in the year of Our Lord One Thousand Eight Hundred and Sixty three.

B. W. Procter
James Wilkes
Commissioners in Lunacy.

ORDER.

I,* William Gray of the City of York Solicitor the undersigned having Authority to discharge Isabella Jane Taylor a Private Patient in York Lunatic Hospital hereby order and direct that the said Isabella Jane Taylor be removed therefrom to the Retreat, Hospital York.

Given under my hand this* 15th day of August in the year of Our Lord One Thousand Eight Hundred and Sixty three

(Signed) W Gray

Place of Abode Minster Yard. York

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

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

In cases of Chancery Patients—The Committee of the Person.

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No 1045. Maria L. Smith.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership by birthright

2. Where was the place of birth of the patient?

Leicester

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Affectionate disposition and amiable — always eccentric — less share of understanding than is common —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No undue cultivation of the understanding & affections
The patient has not received any literary instruction and is unable to read

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Light domestic employment only, her habits are industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Paralysed from birth and afflicted with epileptic fits until her 11th year

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Her malady existed from birth —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Yes — Her paternal grandfather has had two attacks of insanity

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Injury previous to birth, and hereditary tendency

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

From birth

15. What has been the duration of the present attack?

From birth

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Her malady has continually increased from birth

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

She has had no intervals of sanity

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

see No 16

19. What were the first decided symptoms of mental aberration?

Strong mental aversion to the sight of several common place objects and great horror of music

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Great impatience and excitability with no power of self-control. * Her mind strongly affected by Children and unusually sensitive to their sufferings - & extremely anxious respecting infants — Has not been subject to any delusions

* For the last 5 or 6 months she has become irritable on account of the sight of her fingers which have to be constantly pratted with gloves to prevent her tearing the skin. —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No see exception - marginal note (No 20)

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very cleanly and decorous —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Good health in general

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has not been in any asylum or hospital

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

When 5 years of age she was under the care of a Homeopathic Physician for some months on account of the Epilepsy without apparent beneficial result — By the advice of nervous Physicians She has for many years been kept as quiet as possible every cause of excitement having been carefully avoided and all her wants anticipated —

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

As here, in fact, has been made a kind of private asylum on her account In spite of all The disorder appears uniformly on the increase —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr Smith
20 Newtown St.
Leicester

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Maria Louisa Smith whom I last saw at Leicester on the (31st) thirty first day of August 1863 (*) a (*) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Maria Louisa Smith

Signed, *Name,* William Smith
Occupation (if any), Collecting Clerk
Place of Abode, 20 Newtown St Leicester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this thirty first Day of August One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Maria Louisa Smith
Sex and Age	Female age 13¼ yrs
Married, Single, or Widowed	—
Condition of Life, and previous Occupation (if any)	Infant
Religious Persuasion, as far as known	Has an aversion to religious subjects
Previous Place of Abode	Leicester
Whether First Attack	Yes
Age (if known) on First Attack	From birth
When and where previously under Care and Treatment	Has not previously been placed under care & treatment
Duration of existing Attack	From birth
Supposed Cause	Injury previous to birth and hereditary tendency
Whether subject to Epilepsy	Yes
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Wm Smith 20 Newtown St Leicester

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

Signed, *Name,* (*) William Smith
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstances of connexion with the Patient

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Shaw of Leicester
being a (a) Fellow of the Royal College of Physicians in London
and being in actual practice as a (b) Physician
hereby certify that I, on the twenty eighth day of August 1863
at (c) 18 New Street Leicester
in the County of Leicester separately from any other Medical Practitioner,
personally examined Maria Louisa Smith
of (d) 20 New Town Street Leicester and that
the said Maria Louisa Smith
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Incoherence of speech. inability to express herself on any subject, except by signs & improper language - Partially idiotic expression of countenance - Causeless likes & dislikes - no memory

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) (her mother - frequent & violent Epileptic attacks - violence of temper, violent antipathies - impossibility of teaching her even her letters - Indecent ways & language - the above has been from childhood
Wants of person of expression
total inability to retain any
learning involving memory -

Signed, *Name*, George Shaw
Place of Abode, New Street Leicester

Dated this 26th day of August One Thousand Eight Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Daniel Moore of Leicester
being a (a) Doctor of Medicine of the University of Edinburgh and Licentiate of the Royal College of Physicians -
and being in actual practice as a (b) Physician and Surgeon
hereby certify, that I on the twenty eighth day of August 1863
at (c) 20 Newtown Street Leicester
in the county of Leicester separately from any other Medical Practitioner,
personally examined Maria Louisa Smith
of (d) 20 Newtown Street Leicester and that
the said Maria Louisa Smith
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherence of speech & unconnected conversation - Expression of Idiocy in the countenance. Great restlessness of manner and factitations of limbs especially when excited. Unreasonable ~~and~~ likes & dislikes of different persons. -

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her Mother informs me that Insanity is hereditary in the family ~~have~~ her Grandfather & father & uncles have suffered from mental aberration -

Signed, *Name*, John Daniel Moore M. D.
Place of Abode, 8 Market Street Leicester

Dated this 28th day of August One Thousand Eight Hundred and Sixty three.

No. 1046. Geo Brigham.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack? – Commenced on Saturday the 5th September

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Yes to all appearance & continued nearly 2 years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

The Patient appeared rather depressed in spirits but no remarkable change was observed –

19. What were the first decided symptoms of mental aberration? –

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He has refused to take food since the attack on Saturday

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

He has appeared to be in general good health although sometimes complained of want of strength.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

J. Backhouse & Co.
Bankers Darlington

No 1046.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive George Brigham whom I last saw at Redcar on the Seventh day of September 1863 (a) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said

Signed, *Name,* William Robt Brigham
Occupation (if any), Draper
Place of Abode, Stockton on Tees
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Eighth Day of September
One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	George Brigham
Sex and Age	about 36. Male
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Bankers Clerk
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Darlington
Whether First Attack	
Age (if known) on First Attack	about 32
When and where previously under Care and Treatment	The Retreat York
Duration of existing Attack	Two days'
Supposed Cause	Insurrection —
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Robt Brigham Stockton on Tees.

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

Signed, *Name,* (c) William Robt Brigham
Occupation (if any), Draper
Place of Abode, Stockton on Tees
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

I, the undersigned, James Heaton Bennett M.D. Edin
being a (a) Licentiate of the Apothecaries Company and Member
of the Royal College of Surgeons Diploma
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the seventh day of September 1863
at (c) 138 High Street Redcar
in the County of Yorkshire separately from any other Medical Practitioner,
personally examined George Bingham
of (d) Darlington Builder and that
the said George Bingham
is a (e) person of unsound Mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Suspicious restless look-
-manner unconnected replies to questions - incoherent
reasoning or delusions & subjects particularly on Sob-

2. Other facts (if any) indicating Insanity communicated to me by others (g) His Sister
Miss Bingham told me he escaped from her at
5 o'clock on Monday morning last. Got out of the window
in his Shirt sleeves & stockings. He was absent for many
hours & was discovered in our stubble near the Cliffs
by Mr. Cockerton Coastguard

Signed, Name, James Heaton Bennett M.D. Edin. Licentiate of
Place of Abode, 167 Redcar Yorks. Apothecaries Coy.

Dated this Eighth day of Sept One Thousand Eight
Hundred and Sixty Three

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

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

I, the undersigned,
being a (a)
and being in actual practice as a (b)
hereby certify, that I on the day of
at (c)
in the county of separately from any other Medical Practitioner,
personally examined
of (d) and that
the said
is a (e) and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

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

Signed, Name,
Place of Abode,

Dated this day of One Thousand Eight
Hundred and Sixty

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No 1046

George Brigham

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, William Wake
being a (a) Member of the College of Surgeons England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 3rd day of September
at the House of John Clarke, Nesbington Road in York
in the County of York separately from any other Medical Practitioner,
personally examined George Brigham Bankers ~~Steward~~
of (c) Mount Pleasant Darlington, and that
the said George Brigham
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) His conversation vague & somewhat incoherent, he fancies that he is acquainted with all the people in Darlington & that I am an old particular friend of his

2. Other facts (if any) indicating Insanity communicated to me by others (g) Henry Sampson Esq informed me that during the afternoon he had been much excited

Signed, Name, William Wake

Place of Abode, 24 Stonegate York

Dated this 4th day of September One Thousand Eight Hundred and Sixty three

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, Samuel William Wake
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 3rd day of September 1863
at the house of John Clarke, Nesbington Road, York
in the county of York separately from any other Medical Practitioner,
personally examined George Brigham, Bankers Clerk,
of (c) No 1 Mount Pleasant, Darlington, and that
the said George Brigham
is a (e) person (unsound) mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Rambling & incoherent conversation. He says that a friend of his Wm Hy Rea has been dead some time makes imputations on him & misconstrues his conduct

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

Signed, Name, Samuel William Wake

Place of Abode, 31 Castlegate York

Dated this 3 day of Sept One Thousand Eight Hundred and Sixty 3.

122

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

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

on the _____ day of _____ (a) a (b) _____ as a Patient into your House.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this _____ Day of _____ One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any) ....

Religious Persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment..

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

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

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

Name and Address of Relative to whom Notice of Death to be sent .....

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

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

~~No 1049~~

No 1046.

Geo Brigham

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive George Brigham

whom I last saw at Redcar

on the seventh day of September (*)

a person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Geo Brigham

Signed, *Name,* William Robt Brigham

Occupation (if any), Draper

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Seventh Day of September

One Thousand Eight Hundred and Sixty three.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	George Brigham
Sex and Age	Male 36
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Bankers clerk
Religious Persuasion, as far as known	Protestants
Previous Place of Abode	Darlington
Whether First Attack	Second
Age (if known) on First Attack	34
When and where previously under Care and Treatment	Retreat York
Duration of existing Attack	~~about 7 months~~ 3 days —
Supposed Cause	not known
Whether subject to Epilepsy	
Whether Suicidal	
Whether Dangerous to others	
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Robt Brigham

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

Signed, *Name,* (*) William Robt Brigham

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient

123

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

I, the undersigned,
being a (*a*)
and being in actual practice as a (*b*)
hereby certify that I, on the day of
at (*c*)
in the County of separately from any other Medical Practitioner,
personally examined
of (*d*) and that
the said
is a (*e*) and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*f*)

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

Signed, *Name*,

Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

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

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

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

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

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

(*f*) *Here state the facts.*

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

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

I, the undersigned,
being a (*a*)
and being in actual practice as a (*b*)
hereby certify, that I on the day of
at (*c*)
in the county of separately from any other Medical Practitioner,
personally examined
of (*d*) and that
the said
is a (*e*) and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (*f*)

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

Signed, *Name*,

Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

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

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

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

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

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

(*f*) *Here state the facts.*

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

No 1047.

Margaret Bateson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

W. H. Bateman
St. John's Lodge
Cambridge

№ 1047.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Margaret Bateson whom I last saw at Shyne Lodge, Lancaster on the seventh day of October 1863 (*) a (†) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Margaret Bateson

Signed, *Name,* W. H. Bateson
Occupation (if any), Master of St. John's College
Place of Abode, Cambridge
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this seventh Day of October One Thousand Eight Hundred and Sixty three

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Margaret Bateson
Sex and Age	Female aged forty seven
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	of no occupation
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Shyne near Lancaster
Whether First Attack	Third attack
Age (if known) on First Attack	forty two or forty three
When and where previously under Care and Treatment	at Liverpool
Duration of existing Attack	ten days
Supposed Cause	none
Whether subject to Epilepsy	no
Whether Suicidal	not known
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	W. H. Bateson, St. John's College Cambridge

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

Signed, *Name,* (*) W. H. Bateson as above
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstances of connexion with the Patient

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, Christopher Johnston Junior being a (a) fellow of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the 14th day of October at (c) Skyne Lodge in the County of Lancaster separately from any other Medical Practitioner, personally examined Margaret Bateson of (d) Skyne Lodge and that the said Margaret Bateson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Restlessness - and unsteadiness has given needless orders to Gardeners - conversation incoherent Answers evasive.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Letters written by the patient have been shewn me which are quite incoherent.

Signed, *Name,* Chr. Johnston Junr.
Place of Abode, Thurles St Lancaster

Dated this 14th day of October One Thousand Eight Hundred and Sixty three.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, James Pearson Surgeon being a (a) Fellow of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify, that I on the 6th day of October 1863 at (c) Skyne Lodge in the county of Lancaster separately from any other Medical Practitioner, personally examined Margaret Bateson of (d) Skyne Lodge and that the said Margt. Bateson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Excitability, suddenly followed by great depression, rambling conversation - alternate laughing & crying

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

Signed, *Name,* J Kenyon
Place of Abode, Lancaster

Dated this 6th day of October One Thousand Eight Hundred and Sixty 3

No 1047. 1048.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

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

on the day of (*)
a (*) as a Patient into your House.

Subjoined is a Statement respecting the said

Signed, *Name*, _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of
One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any) ....

Religious Persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment ..

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

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

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

Name and Address of Relative to whom Notice of Death to be sent .....

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

Signed, *Name*, (*) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

No 1048 Henry R Thorpe

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Joseph Kidd M D M R C S being a (a) Physician, member of Royal College of Surgeons England M D of Kings College Aberdeen and being in actual practice as a (b) Physician hereby certify that I, on the 9th day of January 1864 at (c) No 3 Great Tower St City of London in the County of Middlesex separately from any other Medical Practitioner, personally examined Henry Thorpe of (d) Stockton on Tees and that the said Henry Thorpe is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Confused manner = incoherency talking about a Religious drama in 144 acts that he had written and wanted to publish = having a call to become a city missionary Inability to fix his thoughts = wandering off into any subject unconnectedly

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr Charles Harrison tells me he walked up from Peterborough to London with the delusion of a great work to do — London = asked him to do a little business = finds him full of mental delusions = this male Jonathan Davy tells me that he has been accustomed at home to violent bursts of anger and violence full of spiritual delusions =

Signed, Name, Joseph Kidd M D M R C S

Place of Abode, 60 Mongate St London

Dated this 9th day of January One Thousand Eight Hundred and Sixty four =

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

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North being a (a) Member of the Royal College of Surgeons and being in actual practice as a (b) Surgeon hereby certify, that I on the tenth day of January — 1864 at (c) Scawins Hotel York in the county of York separately from any other Medical Practitioner, personally examined Henry Thorpe of no occupation ~~of Stockton on~~ of (d) Stockton on Tees and that the said Henry Thorpe is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Inherently — rambling conversation on various topics that he has written a drama in 144 acts that he has wandered from Stockton to London for the purpose of publishing it

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

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

Signed, Name, Samuel William North

Place of Abode, 31 Castlegate York

Dated this 10th day of January One Thousand Eight Hundred and Sixty four

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No ~~1047~~ 1048. Henry R Thorpe

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles Trotter
being a (a) Fellow of the Royal College of Surgeons & a Licentiate of the Apothecarys Company
and being in actual practice as a (b) Surgeon Apothecary
hereby certify that I, on the day of
at (c) Stockton on Tees
in the County of Durham separately from any other Medical Practitioner,
personally examined Henry Reed Thorp
of (d) South Street Stockton and that
the said Henry Reed Thorp
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Very excitable writing & spouting Plays & at other times on religious subjects is very incoherent

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
By his Mother that he is violent to his Brother & Sisters & has threatened herself

Signed, *Name,* Charles Trotter
Place of Abode, High Street Stockton

Dated this day of One Thousand Eight Hundred and Sixty

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned,
being a (a)
and being in actual practice as a (b)
hereby certify, that I on the day of
at (c)
in the county of separately from any other Medical Practitioner,
personally examined
of (d) and that
the said
is a (e) and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

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

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

Signed, *Name,*
Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

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No. 1048

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Henry Reed Thorp

whom I last saw at Stockton — on the Twenty sixth day of 12th Month (last month) a person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Henry Reed Thorp

Signed, *Name,* William Burrington

Occupation (if any), Merchant

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient Great Uncle

Dated this Eighth Day of 1st Month

One Thousand Eight Hundred and Sixty Four

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Henry Reed Thorp
Sex and Age	born 6th Month 1847 about Sixteen
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	First went to William Martin Wood with the view of being
Religious Persuasion, as far as known	attended Friends Meeting apprentice as grocer about 7 months afterwards to Harrisons & Cardiffs London about 4 mos. since which no settled occupation
Previous Place of Abode	
Whether First Attack	has several times left home unknown to his Mother
Age (if known) on First Attack	
When and where previously under Care and Treatment	not under treatment previously
Duration of existing Attack	for at least six months has been excited and unsettled
Supposed Cause	do not know
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	Nothing come to my notice
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	H.R. Thorp left home unknown to his Mother & friends and being now in London cannot immediately have him examined by another Medical Practitioner. Mr Wolter who has signed the Certificate herewith sent has attended the Family for about fifteen years
Name and Address of Relative to whom Notice of Death to be sent	Mary Thorp South Street

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

Signed, Name, (c) William Burrington

Occupation (if any), Merchant

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient — his Fathers Uncle

No 1048.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Henry Rees Thorp

whom I last saw at Stockton a few days ago

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

a (b) as a Patient into your House.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Regents

Dated this 26th Day of 12 month

One Thousand Eight Hundred and Sixty ~~Three~~ Three

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Henry Rees Thorpe
Sex and Age	— 16½ years —
Married, Single, or Widowed	— Attended Three places since Sunday School
Condition of Life, and previous Occupation (if any)	— attends Friends Meetings generally
Religious Persuasion, as far as known	—
Previous Place of Abode	— About of this year more or less singular
Whether First Attack	—
Age (if known) on First Attack	— none
When and where previously under Care and Treatment ..	—
Duration of existing Attack	—
Supposed Cause	— No
Whether subject to Epilepsy	— No
Whether Suicidal	— No
Whether Dangerous to others	
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	— Mary Thorp South Street Stockton on Tees

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

Signed, *Name,* (c) William Ryerson

Occupation (if any), Merchant

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient Great Uncle

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Charles Tetton
being a (a) Fellow of the Royal College of Surgeons & Licentiate of the Apothecaries Company
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify that I, on the 22nd day of Dec 2nd 1863
at (c) Court Hall Stockton on Tees. County of Durham
in the County of Durham separately from any other Medical Practitioner,
personally examined Henry Reed Thorp
of (d) South Street Norton and that
the said Henry Reed Thorp
is a (e) of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Wasting Days without rest unintelligible conducting himself in an excited manner & his conversation altogether absurd

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her Mother Mrs Hall by is violent in the house & to his Brother Thomas also he was left for one out & returned all night & committed with rape as regards purchases of others

Signed, *Name,* Charles Tetton
Place of Abode, Low Street Norton on Tees

Dated this 24th day of Dec 2nd One Thousand Eight Hundred and Sixty three

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned,
being a (a)
and being in actual practice as a (b)
hereby certify, that I on the day of
at (c)
in the county of separately from any other Medical Practitioner,
personally examined and that
of (d)
the said
is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

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

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

Signed, *Name,*
Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

No 1028. H & R Thorpe

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? — Not a Member — His Father was born a Member and continued so until his Marriage

2. Where was the place of birth of the patient? Heckmondwike Birkenhead

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Impulsive and excitable

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Nothing particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Carefully trained by his Mother
Previously to going Educated at Ayton Agricultural School — Fair attainments at School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
Went to Wood as Apprentice to the Grocery Business at Sheffield — In Very unsteady habits. gave up During — Has tried several places since) without success

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
— Minor

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? — has read parts of Shakespeare & Festus which has given him a turn for Drama

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
has been discouraged at his meeting with occupation he sent him

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? — Whilst at Ayton School had his Foot and Ankle much bruised & injured by an accident with the Washing Machine which may have affected the nervous System

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? — None that we are aware of

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
unknown

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 15½

15. What has been the duration of the present attack? ✓

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? 3 attacks. recovery every time home.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
no interval between the attacks

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Depression of spirits & disturbed sleep

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
disire to go from home; religious — taken up with dramatic compositions

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No. —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No.

23. What are the habits of the patient as regards personal cleanliness and decorum? generally cleanly.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Quite good health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? none

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing, between violence, when nothing crosses him

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

To be sent to David Thorp
Leeds

No 1049. Mary J Sunderland.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Jane Sunderland whom I last saw at Keighley on the twenty sixth day of February, 1864 (*) as a Patient into your House.

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

a person of unsound mind

Subjoined is a Statement respecting the said Mary Jane Sunderland.

Signed, *Name,* John Edwin Sunderland
Occupation (if any), Commission agent
Place of Abode, Keighley
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 26 Twenty fifth Day of February
One Thousand Eight Hundred and Sixty Four

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Mary Jane Sunderland
Sex and Age	Female, 21 years on the 27th March next
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Sister to a Manufacturer.
Religious Persuasion, as far as known	Disposed to attend Methodist Chapel
Previous Place of Abode	Keighley
Whether First Attack	Yes
Age (if known) on First Attack	about 18 years
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	About 5 years.
Supposed Cause	Masturbation.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	J. Sunderland, Keighley

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

Signed, *Name,* (c) John Edwin Sunderland
Occupation (if any), Com. Agent
Place of Abode, Keighley
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

J. E. Sunderland
7 Union St
Bradford.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

X

I, the undersigned, Angus Cameron
being a (a) Doctor of medicine ~~Ed. Dinburgh~~
and being in actual practice as a (b) General practitioner
hereby certify that I, on the twenty fifth day of February
at (c) Highfield Lane Keighley
in the County of York separately from any other Medical Practitioner,
personally examined Mary Jane Sunderland
of (d) Highfield Lane Keighley and that
the said Mary Jane Sunderland
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) I have seen her furious, shouting, screaming and striking the walls of the room with hands and feet, rambling in speech, and expressed a desire to stab some person

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
She is undutiful, negligent in person careless in dress at times very much depressed, at others very excited and passionate threatening the lives of those who offend her } From her brother and Housekeeper

Signed, *Name,* Angus Cameron M.D.
Place of Abode, Keighley

Dated this Twenty fifth day of February One Thousand Eight Hundred and Sixty four Years

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, ~~Thos H. Cockcroft~~
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon &c
hereby certify, that I on the Twenty fifth day of February
at (c) the house of her brother Highfield Keighley
in the county of York separately from any other Medical Practitioner,
personally examined Mary Jane Sunderland
of (d) Highfield ~~Keighley~~ Lane, Keighley and that
the said Mary Jane Sunderland
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
1 Says she would like to break all the things in the next room.
2d Thus she would like to tear her dresses to pieces.
3d She has the idea that her brother intends to murder her, and she sometimes thinks she would like to kill him.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
1 Will frequently wander from home and remain out all night
2d Sometimes she refuses to wash herself or keep herself clean.
3d Gets up in the night and lights all the lights in the house } From Alice Bradley her brother's housekeeper

Signed, *Name,* Thomas H. Cockcroft
Place of Abode, Keighley

Dated this Twenty fifth day of February One Thousand Eight Hundred and Sixty four.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Her grandmother, Uncle were members, Aunt & Cousin now members,

2. Where was the place of birth of the patient? High Sheet, Keighley,

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No,

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
She was affectionate, considered to be possessed of good abilities, & attentive to her studies, especially such as was of a religious kind.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
Yes! Such as is usually given in Ladies School. She was a pupil many years at Mr. Smith, Sandy wood, Keighley

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?
None! up to the age of about 16, she was thought to be moderately diligent, regular in her conduct, Since then she has gradually grown worse

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No ——

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No,

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
She Typhus fever when about 11 years old.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No. She has a cousin who is considered very eccentric & scarcely thought to be of sound mind but he is kept under no restraint.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
Do not Know,

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? At about 16 years.

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

She has suffered much from not being able to sleep
Do not know that her health has been particularly affected
Sometimes is very high Spirited at others, very low, sometimes excited
at others mild & quiet

19. What were the first decided symptoms of mental aberration?

Commenced talking to herself out of the room
Odd motions on a journey from Bradford
to Keighley about 5 years ago,

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Is in a system of neglect to personal appearance & cleanliness
& great disinclination to exert herself in any useful employment
She appears to think that she only wants to walk out for exercise
that she can never buy soap that she ought to be kept a lady &c &c

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

Nothing further than violent temper,

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No

23. What are the habits of the patient as regards personal cleanliness and decorum? As previously stated there is a great want of cleanliness & tidiness She has not been giddy, but on the contrary walked steadily was always steady

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? None,

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be increasing in force, it
appears at uncertain times, towards dinner she
left, when every attempt was made to induce her to work

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wm Smith Esq
Keighley

No 1050. Margaret Brown

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A Member by Birthright

2. Where was the place of birth of the patient? Earith

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing remarkable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She had a good education at good Boarding Schools till 17 years of age

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Nothing particular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Been fond of study

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? no

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? The Patients + Grandfather was of unsound mind and was for some time a patient in the York Retreat

+ Maternal

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? No cause known

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

at the age of 27.

15. What has been the duration of the present attack?

Two Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Restless nights

19. What were the first decided symptoms of mental aberration? Excited conduct whilst at Darlington where the patient was then living

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The idea that a young man paid her attention & that those arround her prevented the success of the affair

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has refused food at times but no disposition to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Quite tidy

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Her bodily health has been generally good but she has suffered frequently at times from pain in the head

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

She has been under Medical care two months, has had a few leeches on her head occasionally with temporary benefit & has had Blisters on under the advice of three medical men

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary like lately

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Richard Brown

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Margaret Brown whom I last saw at Earith on the 20th day of March 1864 (*) as a Patient into your House.

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

a (1) person of unsound mine

Subjoined is a Statement respecting the said Margaret Brown

Signed, *Name,* Richard Brown
Occupation (if any), Farmer
Place of Abode, Earith Huntingdonshire
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this 20th Day of March
One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Margaret Brown
Sex and Age	Female age 28 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	4 years teaching in a School at Darlington
Religious Persuasion, as far as known	Friend
Previous Place of Abode	Earith
Whether First Attack	First
Age (if known) on First Attack	27
When and where previously under Care and Treatment	Earith
Duration of existing Attack	10 months
Supposed Cause	Mrs Brown
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Richard Brown Earith Huntingdonshire

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

John signed as above?

Signed, *Name,* (c) Richard Brown
Occupation (if any), Farmer
Place of Abode, Earith Huntingdonshire
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Mark
being a (a) Fellow of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the nineteenth day of March 1864
at (c) Earith
in the County of Huntingdon separately from any other Medical Practitioner,
personally examined Margaret Brown
of (d) Earith and that
the said Margaret Brown
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
under delusions - that food and other things are poisoned - smells & screams & Strychnia - that everything is done by other Enemy &c.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Under the delusion that she is the victim of a plot of some of her acquaintances & distance.

Signed, *Name,* W. Mark M. D.
Place of Abode, Huntingdon

Dated this nineteenth day of March One Thousand Eight Hundred and Sixty four

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, George Lonsdale Girling
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twentieth day of March 1864
at (c) Earith
in the county of Huntingdon separately from any other Medical Practitioner,
personally examined Margaret Brown
of (d) Earith and that
the said Margaret Brown
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She is under strong delusions respecting a plot entered into against her by many persons at a distance & that all her food & clothes are impregnated with poison & that her neighbours have poisoned their fires so that the smoke may suffocate her

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
This morning she travelled to a neighbouring village to see a sick man, she went into the house of said sick man was an Italian there whom she must see & attempted to go up stairs but was prevented.

Signed, *Name,* George Lonsdale Girling
Place of Abode, St Ives Hunts

Dated this twentieth day of March One Thousand Eight Hundred and Sixty four

1051.

Sarah Barnes

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Barnes

whom I last saw at Glovers Buildings Steel House Lane Birmingham on the Sixth day of Fourth Month (*) as a Patient into your House.

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

Subjoined is a Statement respecting the said Sarah Barnes

Signed, *Name,* Benjn Head Cadbury

Occupation (if any), none

Place of Abode, Grove House Edgbaston Birmingham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Having charge of her by the desire of Friends

Dated this Twentythird Day of Fourth Month

One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Sarah Barnes
Sex and Age	Female Aged 74 years
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	no occupation supported by Friends
Religious Persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Glovers Buildings Steel House Lane Birmingham
Whether First Attack	yes
Age (if known) on First Attack	72 years
When and where previously under Care and Treatment	nowhere
Duration of existing Attack	Coming on 18 Months to 2 years
Supposed Cause	General breaking of the constitution
Whether subject to Epilepsy	yes
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No —
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Joseph Barnes her Son or B. H. Cadbury Grove House Edgbaston who has some care of S Barnes affairs

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

Signed, *Name,* (*) Joseph Barnes

Occupation (if any), Sadler

Place of Abode, Balsall Heath Birm^g

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son of Sarah Barnes

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Pye Henry Chavasse
being a (a) Fellow of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Twentieth day of April, 1864
at (c) No number, Norton Street, Mary Street, Balsall Heath
in the County of Worcester — separately from any other Medical Practitioner,
personally examined Sarah Barnes —
of (d) Norton Street, Mary Street, Balsall Heath, no occupation, and that
the said Sarah Barnes
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — She is very restless nervous and fidgetty, and frequently endeavours to escape from her friends. — She told me that every night she hears all the church bells of Birmingham ringing. Although it is utterly impossible for her to do so — as she is quite deaf and is residing in the country, at least two miles and a half from Birmingham.

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

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

Signed, *Name,* Pye Henry Chavasse
Place of Abode, Priory House, Old Square, Birmingham

Dated this Twenty-second day of April One Thousand Eight Hundred and Sixty four

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Richard Momason
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Twenty first day of April 1864
at (c) Norton Street, Mary St. Balsall Heath
in the county of Worcester separately from any other Medical Practitioner,
personally examined Sarah Barnes
of (d) Norton St. Mary St. Balsall Heath, no occupation and that
the said Sarah Barnes
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
I have frequently attended her and for the last three or four years have marked the decline of her mental faculties. She is incoherent in talk, childish in manner, mischievous, opens her friends letters, borrows money to spend in cab and omnibus fare for no purpose, and incurs debts having no means to liquidate them is extremely irritable and excitable without cause, has delusions viz. that the bus had falls in the street. Such not being the fact, is continually packing up her things to go away and endeavouring to do so.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Clara Barnes her daughter in law states that she has struck her and put her out of the house locking the door upon her.

Signed, *Name,* Richard Momason
Place of Abode, 45 Whitall St Birmingham

Dated this twenty second day of April One Thousand Eight Hundred and Sixty four.

No 1051.

Sarah Barnes

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Membership by birth

2. Where was the place of birth of the patient? Birmingham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

She was of a vigorous decided mind and disposition

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Referd query must be answered in the negative - She had not much instruction. We believe she was educated at Ackworth

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Housekeeping her habits &c were good

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married at about 20 years of age she had 8 children the eldest would be and the youngest 1 left 2 The others died early

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No particular change - generally in rather low circumstances

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

She has had epileptic fits

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

None -

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The attacks apparently proceeds from a general breaking up of the mental and to a certain extent bodily powers

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About 72

15. What has been the duration of the present attack?

coming on for about 10 month, or less year

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

no

19. What were the first decided symptoms of mental aberration?

The progress has been very gradual

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

See medical certificate —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Particularly clean - Hasty tempered

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Considering her years — in good bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

None have been used except the kind care of friends & medical man

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing — She is clearer at times than others

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

No 1052.

Amy R Dobson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the place of birth of the patient?

Nottingham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

was always eccentric & rather better memory than average absurdly proud -

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No - education average - at school kept by a lady -

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

None habits industrious restlessly so

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No - but one sister Paralytic & one Epileptic

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

unknown

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

22 yrs

15. What has been the duration of the present attack?

4 yrs

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

has had only one attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

None

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

both — yes irritable proud — ambitious imagination
sleep disturbed — she started a deal

19. What were the first decided symptoms of mental aberration?

Annoyance of a Causeless kind with passers by in the street for looking at her

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

See the Certificate

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

she is violent of angry but not considered dangerous

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

she has threatened & has refused food

23. What are the habits of the patient as regards personal cleanliness and decorum?

she is clean but not always decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Yes June 1862 for three months —
Slight improvement

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

no medical means (see above)

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

increasing slowly she varies but no intervals of complete sanity

W. H. Ranson

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Dobson Senr
Newstead Grove
Nottingham —

No 1052.

Amy R Dobson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Amy Rebecca Dobson whom I last saw at home Newstead Grove Nottingham on the 10th day of May 1864 (*) a (*) person of unsound mind a Patient into your House.

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

Subjoined is a Statement respecting the said Amy Rebecca Dobson

Signed, *Name,* John Dobson Senr
Occupation (if any), Lace manufacturer
Place of Abode, Newstead Grove Nottingham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this 10th Day of May 1864
One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Amy Rebecca Dobson
Sex and Age	Female age 26 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No Particular occupation since leaving School
Religious Persuasion, as far as known	Baptist
Previous Place of Abode	Sutton in Ashfield
Whether First Attack	Yes
Age (if known) on First Attack	22
When and where previously under Care and Treatment	At the Coppice Asylum Nottingham
Duration of existing Attack	4 Years
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Yes — June 1862
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	John Dobson Senr Newstead Grove Nottingham

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

Signed, *Name,* (*) Betsy Dorothy Dobson
Occupation (if any),
Place of Abode, Newstead Grove Nottingham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, John Alfred Harding being a (a) Licentiate of the Royal College of Phys. Edin & Member of the R.C. of Surgeons England and being in actual practice as a (b) Physician & Surgeon hereby certify that I, on the ninth day of May at (c) the house of Mr Needham's Market Place Sutton in the County of Notts separately from any other Medical Practitioner, personally examined Ann Dobson of (d) Newstead Grove Nottingham and that the said Ann Dobson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) That her conversation is incoherent and rambling, and her manner excited and irrational. She imagines that her family behave ill to her, and that all people stare at her in an improper manner.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her cousin states that she swears, and uses obscene language, that she came out of her room to receive a jug of water from the servant in a state of nudity, that she wanders about the house at night & often refuses to take food.

Signed, *Name,* John A. Harding

Place of Abode, Sutton in Ashfield

Dated this ninth day of May One Thousand Eight Hundred and Sixty four.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, William Henry Ransom being a (a) Doctor of Medicine of the University of London and being in actual practice as a (b) Physician hereby certify, that I on the ninth day of May at (c) Newstead Grove Nottingham in the county of Notts (Notts) separately from any other Medical Practitioner, personally examined Ann Dobson of (d) Newstead Grove Nottingham and that the said Ann Dobson is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) - for 3 years has been under medical care for insanity which began with Cancer of the uterus at present in ulcerated and after a time, he took Carcinoma of the bowels & became violent & dangerous & I had to have her in charge. After 9 a year & afterwards at the Asylum Nottingham, Similar mischievous propensities to excitable & violent in language & in acts & take Carmelite, dislikes & refuses food, Her Relatives assure me that she has used of late obscene language & at times hysterically attacks them & that she is a source of trouble in her own life & the persons of those around her.

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

Signed, *Name,* W. H. Ransom M.D.

Place of Abode, Nottingham

Dated this ninth day of May One Thousand Eight Hundred and Sixty four

No 1053. Nathan'l Miles

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

By Birthright —

2. Where was the place of birth of the patient?

Worcester —

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

reserved nesp —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

—

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Academic school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Grocer. tendency to indolence

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Scientific tendencies —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

—

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Torpid Liver inclined to jaundice

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Natural reserve, & sedentary habits as dwelling upon his own sensations

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? about Two years ago.

15. What has been the duration of the present attack? Several weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? as above.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Ø

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Will not attend to business for three or four years previously asked to do so.

19. What were the first decided symptoms of mental aberration? Leaving up his wearing apparel, ~~[illegible]~~ ~~[illegible]~~ ~~[illegible]~~

1053. Nathl Miles

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Nathaniel Miles Junr whom I last saw at home. (Worcester) on the 18th day of 5th mo. (*)

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

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

Subjoined is a Statement respecting the said Nathaniel Miles Junr

Signed, *Name,* Nathaniel Miles
Occupation (if any), Grocer
Place of Abode, High Street Worcester
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this 18 Day of 5mo
One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Nathaniel Miles
Sex and Age	Thirty Nine
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	assistant to his Father
Religious Persuasion, as far as known	Friend
Previous Place of Abode	—
Whether First Attack	—
Age (if known) on First Attack	about 34
When and where previously under Care and Treatment ..	No where
Duration of existing Attack	almost continuous
Supposed Cause	unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	possibly
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Nathaniel Miles High St. Worcester

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

Signed, *Name,* (c) Nathaniel Miles
Occupation (if any), Grocer
Place of Abode, Worcester
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, William Stroup Doctor of Medicine of Universities
being a (a) ~~Physician~~ Member of the Royal College of Edinburgh
& Physicians of London,
and being in actual practice as a (b) Physician
hereby certify that I, on the Thirteenth day of 17th May 1864
at (c) High Street City of Worcester
in the County of Worcester separately from any other Medical Practitioner,
personally examined Nathaniel Miles Junr
of (d) High Street Worcester and that
the said Nathaniel Miles
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
Incoherence of Ideas, false conceptions, Violence
~~of Temper, Sudden Motions~~, Hallucinations, and
general laxity control over his senses,

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Long continued eccentricity many years duration.
Threatening violence to others, Undressing his clothes, Refusing to be
communicated by his father and Brother.

Signed, Name, William Stroup M.D
Place of Abode, 42 Foregate Street. Worcester.

Dated this seventeenth day of May One Thousand Eight
Hundred and Sixty four.

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Herbert W Budd .F
being a (a) Fellow of the College of Surgeons London.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the seventeenth day of May 1864
at (c) High Street City of Worcester
in the county of Worcester separately from any other Medical Practitioner,
personally examined Nathaniel Miles Junr
of (d) High St. City of Worcester and that
the said Nathaniel Miles
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). Constant Restlessness -
Wildness of & prosperin eyes.. Great incoherence
in rambling ideas - Inability to control his ideas for
a few seconds - Proofs of the Hallucinations & notes of Clothes
Have known him as of a violent for several Years

2. Other facts (if any) indicating Insanity communicated to me by others (g) by
Her friends & quotes upon the Fact & the broken Body
Linen & her body Linen for some weeks past - he threatened
to cut her Father throat - Has Many times from fear - locked
& barricaded Doors down at night.

Signed, Name, Herbert W Budd
Place of Abode, High Street Worcester

Dated this 17th day of May One Thousand Eight
Hundred and Sixty four

Herbert W Budd
F.R.C.S.L.

No 1054. Eliz. Jane Hinton

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 30th day of June 1864, of Elizabeth Jane Hinton a Private Patient in Burlington House, near Bristol to the Retreat ~~House~~, York.

Given under our hands this 6th day of June in the year of Our Lord One Thousand Eight Hundred and Sixty four.

B. W. Porter.
Robert Nairne
Commissioners in Lunacy.

ORDER.

I,* Charles Fox Hinton having Authority to discharge Elizabeth Jane Hinton the undersigned a Private Patient in Burlington House, near Bristol hereby order and direct that the said Elizabeth Jane Hinton be removed therefrom to the Retreat ~~House~~, York

Given under my hand this* 7th day of June in the year of Our Lord One Thousand Eight Hundred and Sixty four.

(Signed) Charles Fox Hinton

Place of Abode 4 North Devon Place Plymouth

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

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

In cases of Chancery Patients—The Committee of the Person.

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№ 1054.

NOTICE OF ADMISSION.

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

We. **I hereby give you Notice,** That Elisabeth. Jane. Hinton.

.

(a) House or hospital.

was admitted into this (a) House . . . as a Private Patient, on the . fifteenth . . Day of June . . . 1863, and ~~I~~ we hereby transmit a Copy of the Order and Medical Certificates on which she was received (b).

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

Signed, Francis & Charles. Fox. M.D.

(c) Superintendent or proprietor of ——.

(c) Proprietors of Brislington House. nr. Bristol.

Dated this sixteenth Day of June

One Thousand Eight Hundred and Sixty three.

To the Commissioners in Lunacy. & clerk of the visitors.

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

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Elisabeth Jane Hinton.

whom I last saw at 23. Park Street Bristol.

on the fifteenth day of June. 1863. (a)

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

Subjoined is a Statement respecting the said Elisabeth Jane Hinton.

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

Signed, Name, Charles Fox Hinton.

Occupation (if any), General Merchant.

Place of Abode, 4 North Devon Place Plymouth.

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

Dated this fifteenth Day of June.

One Thousand Eight Hundred and Sixty three.

To Doctors Fox.

(c) Proprietors of (d) Burlington House Bristol

(c) Proprietor or superintendent of ——.
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

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

Name of Patient, with Christian Name at length	Elisabeth Jane Hinton.
Sex and Age	female about 43.
Married, Single, or Widowed	single.
Condition of Life, and previous Occupation (if any)	none.
Religious Persuasion, as far as known	Member of Society of Friends.
Previous Place of Abode	Durham Place Plymouth.
Whether First Attack	yes.
Age (if known) on First Attack	43 years.
When and where previously under Care and Treatment	Durham Place Plymouth.
Duration of existing Attack	six months.
Supposed Cause	unknown.
Whether subject to Epilepsy	no.
Whether Suicidal	no.
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	~~Charles~~ none.
Name and Address of Relative to whom Notice of Death to be sent	Charles Fox Hinton.

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

Signed, Name, (e) Charles Fox Hinton

Occupation (if any), General Merchant.

Place of Abode, 4 North Devon Place Plymouth.

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

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, James. M. Crichton.
being a (a) Licentiate of the Royal College of surgeons. Edinburgh.
and being in actual practice as a (b) Surgeon.
hereby certify, that I, on the fifteenth day of June.
at (c) 23. Park Street. Bristol.
in the County of Gloucester separately from any other Medical Practitioner,
personally examined Elisabeth. Jane. Hunton.
of (d) Plymouth. at Durham Place and that
the said Elisabeth. Jane. Hunton.
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Has an idea that persons are endeavouring to administer poison in her food, & frequently refuses to eat in consequence - is subject to illusions as to the character of the house she may be in, & that different individuals are trying to injure her at times talking incessantly in all manner of subjects.

2. Other facts (if any) indicating Insanity communicated to me by others (g) (States by Mr Thom at Swan Hotel) who states that for several nights she kept ringing the bell incessantly and insisting that persons were outside, speaking about her.

Signed, Name, James. M. Crichton.
Place of Abode, 11. Dowry Square. Clifton. Bristol.
Dated this fifteenth day of June One Thousand Eight Hundred and Sixty three.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, Augustus Talbot.
being a (a) member of the Royal College of Surgeons of England.
and being in actual practice as a (b) surgeon.
hereby certify, that I on the fifteenth day of June. 1863.
at (c) 23 Park. Street. Bristol.
in the County of Gloucester separately from any other Medical Practitioner,
personally examined Elisabeth. Jane. Hunton.
of (d) Durham Place - Plymouth and that
the said Elisabeth. Jane. Hunton
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Laboring under false impression and acting thereon - changes her residence very often under the impression that a person (a resident of Plymouth) is following her about, & speaking evil of her, which is untrue. Says, she hears persons speaking ill of her out of doors and elsewhere - also incorrect - Says, that her food is poisoned, and occasionally will not eat it, under this impression.

2. Other facts (if any) indicating Insanity communicated to me by others (g) (States by Mr Thom of George Hotel, Temple Gate, Bristol) - that she attempted to jump out of her window - became very noisy & violent - under the idea, that she was followed & molested by persons; & that she was in an improper house - also that she threatened to cut her throat.

Signed, Name, Augustus Talbot.
Place of Abode, 23. Park. Street. Bristol.
Dated this fifteenth day of June One Thousand Eight Hundred and Sixty three.

Burlington House nr Bristol. 26th April. 1864.

We hereby certify, that this is a correct copy of the order for reception - Statement, & Medical certificates, under which Elisabeth Jane Hinton was admitted into this House.

Francis & Charles Fox. M.D.

No 1055. James Newby

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A Member by birth.

2. Where was the place of birth of the patient?

New Dale in the Parish of Wellington in the County of Salop

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Cannot state.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Cannot state: but believe that nothing unusual in either direction was noticeable.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Should apprehend the understanding and the affections very little cultivated in early life. Had an elementary education for years.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

Was apprenticed to a Baker and Flour dealer: was moderately industrious: has been uniformly temperate and upright in conduct. Brought up to be an Accountant.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Is married: at time of marriage was about 21 years of age: two children who did not survive their birth.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Both Father and Mother were very eccentric, and tho' never under care, both occasionally were scarcely sane.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Cannot explain: may be an hereditary tendency aggravated by indoor and late occupation: acted by minor causes: such as the noise of the Iron Works: the case of his situation &c.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Has several times exhibited eccentricity: so that it is impossible to state the age at which such symptoms first appeared.

15. What has been the duration of the present attack? several Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Consider this to be the first decided attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Was depressed in spirits; was out of health, and unable to sleep soundly or refreshingly for some time.

19. What were the first decided symptoms of mental aberration?

Religious despondency.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Chiefly despondency: with reference both to his temporal and to his spiritual future. No delusions unconnected with these subjects.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has not exhibited violence, nor made any attacks upon persons.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has not refused food: but has spoken of life being a burden to him.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Is in good bodily health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Has not been under care before.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

No medical means have been used: but has been from home for the benefit of the change.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

gradually increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

The Mo. Meetg.
Chrop. Preparative Meetg.

William G. Norris
Coalbrookdale
Wellington
Salop.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Necoby whom I last saw at Horshay, Coalbrook Dale on the Sixteenth day of 7th mo: (July) (*) a person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said James Necoby.

Signed, *Name,* Elizabeth Necoby

Occupation (if any), —

Place of Abode, Horshay Coalbrookedale

Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this Sixteenth Day of 7th Mo. (July)

One Thousand Eight Hundred and Sixty four.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	James Necoby no.
Sex and Age	Male. 54. Born 1810 8/12 —
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Accountant.
Religious Persuasion, as far as known	A Friend.
Previous Place of Abode	Horshay in Wellington Salop.
Whether First Attack	Considered to be the first attack
Age (if known) on First Attack	53. 54.
When and where previously under Care and Treatment	Not before under care.
Duration of existing Attack	Several months.
Supposed Cause	see answer to query 13. —
Whether subject to Epilepsy	Not subject to Epilepsy.
Whether Suicidal	Possibly.
Whether Dangerous to others	Not hitherto.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Elizabeth Necoby, Horshay, in Wellington Salop.

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

Signed, *Name,* (*) Wm Morris

Occupation (if any), Accountant

Place of Abode, Coalbrookdale in Wellington Salop.

Degree of Relationship (if any), or other circumstances of connexion with the Patient a Friend only.

1444

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Edward Edwards
being a (a) Member of the Royal Coll. of Surgeons, London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the eleventh day of July 1864.
at (c) Horsehay in the Parish of Dawley
in the County of Shropshire separately from any other Medical Practitioner,
personally examined James Newby
of (d) Horsehay, Accountant and that
the said James Newby
is a (e) Person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Vague & incoherent language
He fancies the functions of the Brain are suspended or the Brain destroyed, that he is an useless Member of Society, that when he returns from the Retreat his Brain being gone he will be unable to resume his former employment, he also hinted (in a covert way) at suicide —

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Unable to apply himself to the duties of his Office
Wandering, restless — & disturbed Sleep

Signed, *Name,* Edward Edwards
Place of Abode, Coal Brook Dale, Shropshire

Dated this fourteenth day of July One Thousand Eight Hundred and Sixty four

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Charles Buckmuth Herne Soame
being a (a) Member of the Royal College of Surgeons - London.
&c &c
and being in actual practice as a (b) Surgeon
hereby certify, that I on the thirteenth day of July 1864
at (c) Horse Hay in the Parish of Dawley
in the county of Salop separately from any other Medical Practitioner,
personally examined James Newby
of (d) Horsehay — Accountant — and that
the said James Newby
is a (e) Person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) His manner strange, & his conversation unconnected his ideas vague — Imagines his Brain is turning to bone — Frequently expresses his firm conviction that his soul is hopelessly lost, and that he has a constant desire to commit suicide:

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
His wife informed me that he generally talked & behaved in the way I then saw.

Signed, *Name,* Charles B H Soame MRCS. LM & LSA
Place of Abode, Dawley — Salop

Dated this fourteenth day of July One Thousand Eight Hundred and Sixty four

No 1056. Harriett Taylor.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.—

2. Where was the place of birth of the patient? Old Malton

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? light hearted & cheerful.— ordinary intellectual endowments.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? affections cultivated to usual degree: received a good education by masters at home, & at ~~young~~ a Lady's Seminary.—

6. To what occupation was the patient brought up; and what were ~~his (or~~ her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? (1.) domestic occupⁿˢ. — industrious.—

7. If the patient be married, state at what age ~~his (or~~ her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. 20 years.— 5 children living, youngest 3 months, & eldest 7 years old.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has ~~her~~ conduct ever exhibited a strong bias in any direction? very fond of music.—

9. Has any material change taken place in the pecuniary circumstances of the patient; or has ~~she~~ been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.— No.—

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.—

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No.—

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Mother, eccentric; — maternal grandmother, eccentric.—

13. What are supposed to be the causes (remote and immediate) of the ~~first~~ attack, ~~and what those of the subsequent and last attacks of~~ mental disorder?

1st Hereditary predisposition.
2nd Debility connected with the puerperal state.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient ~~first~~ attacked with symptoms of insanity? 28 years.—

15. What has been the duration of the present attack? —— 13 days.——

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? this is the first attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

—

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
for the last 6 or 7 weeks, occasional manifestations of lowness of spirits, 2 days before the attack was unusually excited:- slept indifferently for 3 weeks past.

19. What were the first decided symptoms of mental aberration? the leaving of her bed room partially dressed,- and rushing into the shop in a hasty & excited ~~shut~~ manner,- with two razors-(sheathed)- in her hand.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
variously & indifferently affected.- No particular delusions.

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person? Destructive ~~to~~ things inanimate, - ~~and~~ but has not manifested dangerous tendency towards individuals.—

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has refused food, but not attempted to injure herself.—

23. What are the habits of the patient as regards personal cleanliness and decorum?

habits not ~~so~~ dirty.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. —

suffering from slight debility.—

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. ——————

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
sustaining by food, as far as possible,- counter irritants with & cold lotions to head, and aperients.- no sedatives.—

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
disease appears to be stationary at present.- there are remissions & exacerbations,- which occur irregularly.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Her husband Mr. Thomas Taylor

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Harriett Taylor whom I last saw at New Malton. on the twentieth day of July, 1864 (*)

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

a (§) person of unsound mind as a Patient into your House.—

Subjoined is a Statement respecting the said Harriett Taylor.

Signed, *Name,* Thomas Taylor

Occupation (if any), Grocer &c.

Place of Abode, New Malton

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband.

Dated this twentieth Day of July.

One Thousand Eight Hundred and Sixty four.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length ..... Harriett Taylor.

Sex and Age ..... Female: 28 years.

Married, Single, or Widowed ..... married

Condition of Life, and previous Occupation (if any) .... Grocer's wife.

Religious Persuasion, as far as known ..... member of the Church of England.

Previous Place of Abode ..... New Malton.—

Whether First Attack ..... yes.

Age (if known) on First Attack ..... —

When and where previously under Care and Treatment .. —

Duration of existing Attack ..... 13 days.

Supposed Cause ..... Hereditary predisposition & debility connected with the puerperal state.

Whether subject to Epilepsy ..... no.—

Whether Suicidal ..... No.—

Whether Dangerous to others ..... No.—

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... —

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

Name and Address of Relative to whom Notice of Death to be sent ..... Mrs Thomas Taylor, Castlegate, Malton

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

Signed, *Name,* (*) Thomas Taylor.

Occupation (if any), Grocer &c

Place of Abode, New Malton.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Barker
being a (a) Member of the Royal College of Surgeons of England, and a Licentiate of the Apothecaries' Company, London,
and being in actual practice as a (b) Surgeon,
hereby certify that I, on the twentieth day of July, 1864,
at (c) Castlegate, Malton,
in the County of York separately from any other Medical Practitioner,
personally examined Harriett Taylor
of (d) Castlegate, Malton, — Grocer's wife — and that
the said Harriett Taylor
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — at times very wild, excited, destructive to bedding & clothing & difficult to manage; — at other times morose, sullen, abstracted and unobservant of what is going on around her. — Has refused food & medicine for nearly two days together, & would not put out her ~~tongue~~ tongue, or otherwise do as she was told. — Has used profane language, & has very frequently made various grimaces, which she was not in the habit of doing before her illness.

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

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

The nurse, Jane Matterson states that the patient has often thrown the pillows, drinking vessels &c at her, and testifies generally to her occasional fits of violence, — her destructiveness of clothing &c. & her obstinacy in refusing food. —

Signed, Name, William Barker,
Place of Abode, Castlegate, Malton.

Dated this twentieth day of July One Thousand Eight Hundred and Sixty four. —

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Richard Jones
being a (a) Licentiate of the College of Physicians of Edinburgh, Member of the Royal College of Surgeons England & Licentiate of the Apothecaries Society London
and being in actual practice as a (b) Physician
hereby certify, that I on the Twentieth day of July 1864 —
at (c) Castlegate, New Malton,
in the county of York separately from any other Medical Practitioner,
personally examined Harriett Taylor
of (d) Castlegate New Malton Grocers Wife and that
the said Harriett Taylor
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) A sudden deviation of her general deportment, sometimes using very profane language, at other tearing both clothing & bedding, then assuming a sullenness & refusing to answer questions, take food, or comply with any request either of the medical or general attendants. Her sullenness being succeeded or preceded by maniacal exaltation, expression restless, making various grimaces, with incoherent conversation.

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

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

The Nurses Mrs Matterson & Mrs Bigham inform me of her refusal to take food, also spitting at them, throwing portions of bedding, Towels or anything within her reach.

Signed, Name, Richard Jones
Place of Abode, Newbegin Malton

Dated this Twentieth day of July One Thousand Eight Hundred and Sixty Four —

No 1057. Jno Denning

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Denning whom I last saw at his lodgings 11 Albert St Darlington on the twenty fifth day of June July 1864 (a) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said John Denning

Signed, *Name,* Samuel Hare
Occupation (if any), Accountant
Place of Abode, Darlington
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Acquainted with Patient & his friends

Dated this twenty sixth Day of July
One Thousand Eight Hundred and Sixty four.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	John Denning
Sex and Age	Male - 23 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Railway Clerk
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	Darlington.
Whether First Attack	Yes
Age (if known) on First Attack	
When and where previously under Care and Treatment ..	
Duration of existing Attack	Nearly a month
Supposed Cause	Excessive mental exertion
Whether subject to Epilepsy	No
Whether Suicidal	No symptoms - has much depressed at times
Whether Dangerous to others	On the 3rd or 4th day after becoming affected but not more recently
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Wm Denning, Benjamin Bens Buildings New Shildon

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

Signed, *Name,* (c) Samuel Hare
Occupation (if any), Accountant
Place of Abode, 16 Mt Pleasant Darlington
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Acquainted with Patient and his Friends

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Thos. Hayes Jackson being a (a) Member of the Royal College of Surgeons London and a Licentiate of the Society of Apothecaries London and being in actual practice as a (b) general practitioner hereby certify that I, on the 26th day of July 1864 at (c) 11 Albert St. Bank Top Darlington in the County of Durham separately from any other Medical Practitioner, personally examined John Denning Railway Clerk of (d) Darlington No 11 Albert Street — and that the said John Denning is a person of unsound mind and is a (e) fit and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Abnormal cunning, and excitement, maniacal expression of countenance, attempted to escape from the second story window during my visit, missed his footing on the Water equarium with his head equarium and introduced the Traffic Lamp.

2. Other facts (if any) indicating Insanity communicated to me by others (g) from out of the House with one leg his shirt, and attempted to escape under a Railway Engine twice whilst in motion, placed himself in front of a slow moving Engine when in motion, and remarked that it would not hurt him.

Signed, Name, Thos. Hayes Jackson
Place of Abode, Darlington

Dated this 26th day of July One Thousand Eight Hundred and Sixty four

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, William Laidlaw being a (a) Member of the Royal College of Surgeons London and a Licentiate of the Apothecary Company Surgeon and apothecary and being in actual practice as a (b) hereby certify, that I on the 26th day of July 1864 at (c) 11 Albert Street Bank Top Darlington in the county of Durham separately from any other Medical Practitioner, personally examined John Denning Railway Clerk of (d) Darlington (No 11 Albert St) and that the said John Denning is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) His Conversation being to absurd. He told me he could live without food & did not want any thing to eat; & that the Locomotive Engines would not injure him

2. Other facts (if any) indicating Insanity communicated to me by others (g) that he had attempted to throw himself before the engine & also to throw himself out of the window

Signed, Name, William Laidlaw
Place of Abode, Darlington

Dated this 26 day of July One Thousand Eight Hundred and Sixty 4

No 1057.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Not in membership. educated at Ayton School.

2. Where was the place of birth of the patient?

Darlington

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing extraordinary

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Not especially in early life; educated at Ayton School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? Time keeper at Railway works involving much writing & calculation — industrious, sober, and good moral conduct.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Strong bias for theological subjects.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

no.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Excessive mental exertion.

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

23 years

15. What has been the duration of the present attack?

Nearly a month

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

see above

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing of this kind observed previous to the first attack

19. What were the first decided symptoms of mental aberration?

Elevated ideas - great desire to travel very quickly - to undertake journeys with no definite object

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

His manner is excited; has intervals of great depression talks of mushing & be blown from a cannon's mouth &c - has attempted to get on & an engine in full motion - to get out from a bed room window &c.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Very violent in the early stages of the complaint - required three men to hold him down & obliged to use sheath waistcoat - attempted to stab his attendant - has been quieter the last few days.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly -

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In fair health now - was affected with dyspepsia - & now then & worn from effects of excitement & delirium.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Has never been so under care

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Opening medicine was administered - which had good temporary effect in removing the more violent symptoms -

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears now rather increasing, though much less violent than at first.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Pease Eastmount Darlington

No: 1058. Sarah M Hodgson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? no

2. Where was the place of birth of the patient? Mountsorrel near Chesterfield

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No not to be remembered of any thing
friends now living

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
None to remember

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Do not know

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Her habits were very regular temperate & useful in acts of Benevolence & charity

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
married at Twenty five age of the Eldest Child living would have been Thirty Six Youngest Twenty Six

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? She was a help her Husband greatly in his private matters & since his death has had a great weight in this respect on her hand & Heart

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? no

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? no

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? She was of a delicate Constitution

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Two members of the Family have been of weak mind

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The Death of a Beloved Husband She had been ill some time; having the care of her Family & extensive Business Engagement as he was Looked for many friends: Since this she has gone into privacy & retirement

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

Fifty Nine

15. What has been the duration of the present attack? Ten Weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Here is the third attack the first have about 6 months duration the principal features were Repeal of Ireland & complete delusion on religious matters

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Her mental powers were pretty good about 2 years between the attacks

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? there was depression of Spirits for some considerable time before the attacks She was more morose & her views of things more desponding: the Liver & Kidneys were Congested

19. What were the first decided symptoms of mental aberration?

That shows a great Hypocrite that all her Benevolence & charity were done to deceive the world & that she had imposed on all her friends in this respect

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. The present delusion is principally on religion, Subjects but she also likes Seclusion what is not considered very safe by those who are nearest to her

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person? no

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She has had in this attack refused food entirely but gradually starting keeps more drink & her friends think it is not safe for her to be alone

23. What are the habits of the patient as regards personal cleanliness and decorum?

Everything that are connected with tidy neat & particular in all she does

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She has suffered from Congestion of the Liver & Kidneys but she is now better

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has been twice at home Stand for about 3 months & each time returned home better

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Aperient Steps & Tonic medicines warm Baths & getting her out in the fresh air which latter has been a great difficulty to accomplish

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

It appears to be increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Marshall Hodgson.

whom I last saw at Grove Cottage Rotherham

on the Tenth day of August (*)

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

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

Subjoined is a Statement respecting the said Sarah Marshall Hodgson.

Signed, *Name,* James Hodgson

Occupation (if any), Corn Merchant & Miller.

Place of Abode, West End Rotherham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son.

Dated this Tenth Day of August.

One Thousand Eight Hundred and Sixty Four.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Sarah Marshall Hodgson.
Sex and Age	Female Sixty Fourth Year.
Married, Single, or Widowed	Widow.
Condition of Life, and previous Occupation (if any)	Independant Lady
Religious persuasion, as far as known	Wesleyan.
Previous Place of Abode	Rotherham
Whether First Attack	No.
Age (if known) on First Attack	Fifty nine.
When and where previously under Care and Treatment	Mount Stead.
Duration of existing Attack	Three Months
Supposed Cause	Derangment of general health.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	James Hodgson, West End Rotherham.

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

Signed, *Name,* (c) James Hodgson.

Occupation (if any), Corn Merchant & Miller

Place of Abode, West End Rotherham.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son.

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, James Crowther being a (a) Licentiate of the apothecaries Company and being in actual practice as a (b) apothecary hereby certify that I, on the 8th day of August 1864 at (c) Grove Cottage Moorgate in the County of York separately from any other Medical Practitioner, personally examined Mrs Sarah Marshall Hodgson of (d) Grove Cottage Moorgate Rotherham and that the said Sarah Marshall Hodgson is a (e) person of Unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) a persistence refusal to take the amount of food & medicine I have ordered her & also obstinate Girrosis & the delusion she is under in Religious matters, she says she has

2. Other facts (if any) indicating Insanity communicated to me by others (g) the above & the suspicion that she will injure herself of which Mrs H. is constantly afraid

× injured her Children & also the Coroner's Jury at the Inquest & like she has been a great Sufferer

Signed, *Name,* James Crowther L.A.C.

Place of Abode, Rotherham

Dated this 8th day of August One Thousand Eight Hundred and Sixty four

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, John Bower being a (a) Licentiate of Apothecaries Company and being in actual practice as a (b) an apothecary hereby certify, that I on the 10th day of August 1864 at (c) Grove Cottage Moorgate in the county of York separately from any other Medical Practitioner, personally examined Mrs Sarah Marshall Hodgson of (d) Grove Cottage Moorgate Rotherham and that the said Sarah Marshall Hodgson is a (e) person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) ~~my~~ evasive answers to questions put to her, and from the general appearance in her face, and her sleepless nights

2. Other facts (if any) indicating Insanity communicated to me by others (g) and also facts given to me by Dr Hallowell of Sheffield who attended her on a former occasion for similar Complaints & but who is ill and unable to attend her at this time

Signed, *Name,* John Bower L. S. A.

Place of Abode, 15 Eyre St Sheffield

Dated this 10th day of August One Thousand Eight Hundred and Sixty four,

No 1059. Joseph Weatherall.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? no

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? do not know

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 65

15. What has been the duration of the present attack? two years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? from the first appearance to this time has been a delusion that he would be arrested and now that he is housed

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? delusion that arrest would come to him

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Chiefly by one delusion

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? no

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? no

23. What are the habits of the patient as regards personal cleanliness and decorum? no complaint

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. health good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. once at the Retreat York for 6 months

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? none

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The delusion gets stronger that he is under the effect of Poison

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

To John Dodshon Stockton on Tees

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Joseph Weatherall whom I last saw at Great Ayton on the 10 of 9mo day of 9th month 1864 (*) a (*) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Joseph Weatherall

Signed, *Name,* Mary Weatherall
Occupation (if any), —
Place of Abode, Great Ayton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife to Joseph Weatherall

Dated this 10 Day of 9 month 1864

One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Joseph Weatherall
Sex and Age	Male 43
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Poor formerly a Grocer
Religious persuasion, as far as known	of the society of Friends
Previous Place of Abode	Stockton on Tees
Whether First Attack	No
Age (if known) on First Attack	63
When and where previously under Care and Treatment	at the Retreat York
Duration of existing Attack	two years
Supposed Cause	dont know
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	to Mary Weatherall Great Ayton Stokesley

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

Signed, *Name,* (*) Mary Weatherall
Occupation (if any), —
Place of Abode, Great Ayton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife to Joseph Weatherall

He Believes That Mr Wetherill and Family are the Victims of Attempted Poisoning Caused by the Effluvia from the Drains

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

I, the undersigned, William A Loy being a (a) Member of the Royal Coll. Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the Ninth day of September at (c) the residence of Joseph Wetherill - Great Ayton in the County of York separately from any other Medical Practitioner, personally examined the said Joseph Wetherill of (d) Great Ayton and that the said Joseph Wetherill is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Joseph Wetherill imagines that two years ago he (by mistake) administered poison to his wife and himself and that it is acting on their systems in such a manner as will cause their sudden death in consequence of which he keeps awake during the night fearing lest his wife should die during sleep and constantly walking the room fearing he may rest he should be found dead.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I was told by a groom that he sent Joseph Wetherill some distance from home, without his hat teaching for his wife and he persuaded him to get into the carriage beside him & drove off home

Signed, Name, William A Loy
Place of Abode, Great Ayton
Dated this Ninth day of September One Thousand Eight Hundred and Sixty four.

The same night I went to see Wetherill, William & his sister Rachel were there. Found the Case —

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

I, the undersigned, Lewis F. Lumley being a (a) M.R.C.S. Lond. L.S.A. and being in actual practice as a (b) Surgeon & Apothecary hereby certify, that I on the tenth day of September at (c) Great Ayton in the county of York separately from any other Medical Practitioner, personally examined Mr. Joseph Wetherall of (d) Great Ayton and that the said Joseph Wetherall is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) X
about 3 years ago I carefully examined this patient & strongly recommended his being placed under proper treatment in an Institution — since then I have frequently seen the case and heard much of his conduct & actions, and added to this day's examination — I feel justified in signing this order

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

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

Signed, Name, L F Lumley
Place of Abode, Great Ayton
Dated this 10th day of Sept One Thousand Eight Hundred and Sixty four

X This man entertains the opinion that he is suffering from the effects of poison. I've worked upon this during my late interviews with him & from observations used I was led to believe that he had made use of some narcotics the nature of which I could not ascertain
L.F.L.

No 1060.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Emma Draper

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Emma Draper whom I last saw at Hope Cottage, Bentham Road, South Hackney — on the fifteenth day of the Ninth Month, 1864, — (c) a (b) Lunatic. as a Patient into your House.

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

Subjoined is a Statement respecting the said Emma Draper

Signed, *Name,* Margaret E. Darton

Occupation (if any),

Place of Abode, 5 Beaverie Road, Stoke Newington.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Clerk to Devonshire House Monthly Meeting of Women Friends.

Dated this fifteenth Day of the Ninth Month One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Emma Draper
Sex and Age	Female 54
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	no occupation — formerly domestic Servant
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Park Street, Stoke Newington
Whether First Attack	Yes —
Age (if known) on First Attack	I do not know
When and where previously under Care and Treatment	under the care of [illegible]
Duration of existing Attack	some months or longer —
Supposed Cause	probably peculiarity of disposition aggravated by living alone
Whether subject to Epilepsy	no
Whether Suicidal	there is no distinct evidence
Whether Dangerous to others	not to
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	not any —
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Charles White, Fly Driver, 9 Leabridge Road Upper Clapton — but Friends will be responsible for any expenses —

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

Signed, *Name,* (c) Margaret E. Darton

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient Clerk to Devonshire House Monthly Meeting of Women Friends.

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

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

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

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

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

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

I, the undersigned, Joseph John Fox being a (a) Member of the Royal Coll. of Surgeons & Licentiate of the Apothecaries' Company and being in actual practice as a (b) Surgeon & apothecary hereby certify that I, on the Fourteenth day of September 1864 at (c) Benham Road – Hope Cottage – South Hackney in the County of Middlesex separately from any other Medical Practitioner, personally examined Emma Draper of (d) Park Street, Stoke Newington and that the said Emma Draper is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Her mind completely absorbed by the idea of others bringing charges against her; — especially charges of having acted immorally

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

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

Signed, Name, Joseph John Fox

Place of Abode, Church Row, Stoke Newington

Dated this 14th day of September One Thousand Eight Hundred and Sixty four

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

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

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

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

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

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

I, the undersigned, Robert Humphrey Cooke being a (a) Fellow of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the 14th day of September 1864 at (c) Hope Cottage Benham Road Hackney in the county of Middlesex separately from any other Medical Practitioner, personally examined Emma Draper of (d) Park Street Stokenewington and that the said Emma Draper is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) a mind absorbed in the groundless belief that the most gross charges of fraud and immorality have been made against her – also in the conviction that all about her are in malicious league against the charge

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) - that she has threatened the life of one of her brothers (they was stated by her sister –) that she has threatened to throw herself out of window & that she has made disturbances by night at the windows (this on the authority of her Medical attendant – Mr. Fox)

Signed, Name, Robert H. Cooke F.R.C.S.

Place of Abode, Stoke Newington

Dated this 14th day of September One Thousand Eight Hundred and Sixty four

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

She is in membership

2. Where was the place of birth of the patient?

~~in the City of London~~ at Tottenham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

She has been a Domestic Servant

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

not to J.W.S. knowledge

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

A Sister has been twice deranged, in each case after Confinement

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

It has come on very gradually — for ~~a few~~ 2 or 3 months those about her have suspected that she was insane

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

imagining that others charged her with various criminal acts

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

no evidence of these

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

no evidence of it

23. What are the habits of the patient as regards personal cleanliness and decorum?

they are good, as far as known

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

For many years she has complained of her head; — she has always had very weak circulation. and great irregularity in the action of the Bowels

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

No 1061. Lucy Reynolds

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Member by Birthright

2. Where was the place of birth of the patient? Rochester Kent

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

A want of general capacity from childhood

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

disposition amiable at no time was any strength of character manifested but very contrary & incorrect in conduct & understanding

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Till she was 30 years of age she lived in an affectionate family circle (when) she received the kindest care she seemed a good English education as day scholar in a private female school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. No occupation her habits temperate regular her general habit rather indolent

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

In early pursuit she was interested into with earnestness more astronomy & music

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Never

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

general nervous debility

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Her mother & her sister were present in the above report

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Her mind has been gradually weakening without any apparent cause

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Shews a disregard for personal cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Disorder appears to be steadily increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Edmund Reynolds
Tottenham

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Cammack being a (a) Fellow of the Royal College of Physicians in London and being in actual practice as a (b) Physician hereby certify that I, on the fifth day of October at (c) the house of John White, w^e the Westlode Street, Spalding, in the County of Lincoln, separately from any other Medical Practitioner, personally examined Lucy Reynolds of (d) Spalding and that the said Lucy Reynolds is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) 1 Imbecility of manner — 2 Want of Memory — 3 Incoherence of conversation — 4. Childish and immoderate laughing without cause.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs White, the wife of John White states that she has been gradually becoming mentally worse — that she neglects to clean and wash herself — that she cannot dress herself — that she dances about the room, making a noise & shaking her hands — that she is sullen & crop — at other times laughing without apparent cause —

Signed, Name, Thomas Cammack MD
Place of Abode, Spalding

Dated this fifth day of October One Thousand Eight Hundred and Sixty four.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Ancell Ball being a (a) Surgeon &c. Licentiate of Royal College of Physicians, Edinb^o. Member of Royal College of Surgeons, London. and being in actual practice as a (b) Surgeon and Apothecary hereby certify, that I on the fifth day of October at (c) the house of John White, situate in a field adjoining Westlode Street, Spalding, in the county of Lincoln separately from any other Medical Practitioner, personally examined the aforesaid Lucy Reynolds of (d) ~~Spalding aforesaid~~ Lucy Reynolds and that the said Lucy Reynolds is a (e) person of unsound mind (incomplete dementia) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) The powers of the mind, though not obliterated, are nevertheless feeble in their operations, as shown by her inability to complete many of her sentences in conversation — by her being unable to repeat the days of the week now, although she could (I am informed) six months ago: by her stating that the late Comet was seen in France (not England) & by laughing immoderately when no sufficient cause for it.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs White adds that she usually runs instead of walks when she goes out for the latter purpose — until recently was very fond of reading novels, but rarely reads at all now. It is not now capable of spending her own money in a proper manner. She also frequently says "Tha'xt" when in the presence of Boys —

Signed, Name, Ancell Ball.
Place of Abode, Spalding, Lincolnshire

Dated this fifth day of October One Thousand Eight Hundred and Sixty four.

No 1061.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Lucy Reynolds whom I last saw at Spalding Lincolnshire on the fifth day of October 1864 as (a) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Lucy Reynolds

Signed, Name, Eliza Reynolds
Occupation (if any), Tottenham
Place of Abode,
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Sister-in-law

Dated this fifth Day of October
One Thousand Eight Hundred and Sixty four.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Lucy Reynolds
Sex and Age	Female 48
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Tradesmans daughter
Religious persuasion, as far as known	A member of the Society of Friends Spalding Lincolnshire
Previous Place of Abode	
Whether First Attack	Yes
Age (if known) on First Attack	Ever since childhood
When and where previously under Care and Treatment	never before under care
Duration of existing Attack	Her mind has been gradually sinking for about 8 years
Supposed Cause	The period of life
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Eliza Reynolds Tottenham

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

Signed, Name, (c) Eliza Reynolds
Occupation (if any),
Place of Abode, Tottenham
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Sister in law

No 1062 Nicholas Tone.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Nicholas Tone whom I last saw at his Grandmother's House, Hawthope in Wardale on the Eighth day of October (*) a person of sound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Nicholas Tone

Signed, *Name,* Jn° C Tone
Occupation (if any), Contractor & Builder
Place of Abode, Sunderland
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Eighth Day of October
One Thousand Eight Hundred and Sixty four.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Nicholas Tone
Sex and Age	Male & 15 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Son of a Contractor
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Sunderland
Whether First Attack	Yes
Age (if known) on First Attack	Five years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	as above
Supposed Cause	Unknown
Whether subject to Epilepsy	Yes
Whether Suicidal	no.
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	John Carr Tone

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

Signed, *Name,* (*) Jn° C Tone
Occupation (if any), Contractor & Builder
Place of Abode, Hockton Road, Sunderland
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

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

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

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

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

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

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

I, the undersigned, Thomas Reddish Torbock.
being a (a) Doctor of Medicine Surgeon & Apothecary
and being in actual practice as a (b) Physician Surgeon and Apothecary
hereby certify that I, on the eighth day of October 1864
at (c) 10. Runnygate Darlington
in the County of Durham separately from any other Medical Practitioner,
personally examined Nicholas Tone
of (d) Hamhope in Weardale and that
the said Nicholas Tone
is a (e) Persons mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds: viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is violent & sometimes violent. His actions being of an Idiotic character and way ward. His intellect is so defective that he cannot be taught to read & talk beyond a few simple words.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) his having been subject of Epileptic Fits from an early age his intellect having impaired in consequence thereof.

Signed, Name, Mr. R. Torbock M.D. M.R.C.S. & L.S.A.
Place of Abode, 10 Runnygate Darlington

Dated this eight day of October One Thousand Eight Hundred and Sixty four

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

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

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

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

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

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

I, the undersigned, John Potts
being a (a) Surgeon & Apothecary
and being in actual practice as a (b) Surgeon & apothecary
hereby certify, that I on the eighth day of October
at (c) Darlington North ~~of England~~ Eastern railway Station
in the county of Durham separately from any other Medical Practitioner,
personally examined Nicholas Tone
of (d) Hamhope in Weardale. and that
the said Nicholas Tone
is a (e) idiotic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) subject to epilepsy for several years, deficient in intellect & occasionally violent incoherent.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) acts of violence with loss of reason, wandering into places of danger without any apprehension & without any self control Communicated by his Father & Mother.

Signed, Name, John Potts
Place of Abode, Sunderland

Dated this eighth day of October One Thousand Eight Hundred and Sixty four

No 1063. Daniel Beeby

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Daniel Beeby whom I last saw at his home, Allonby, on the eleventh day of 10th mo: (October) (*) a Idiot as a Patient into your House.

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

Subjoined is a Statement respecting the said Daniel Beeby

Signed, *Name,* Dan Glaister
Occupation (if any), Ship Owner
Place of Abode, Maryport
Degree of Relationship (if any), or other circumstances of connexion with the Patient Trustee

Dated this Eleventh Day of October
One Thousand Eight Hundred and Sixty Four.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Daniel Beeby
Sex and Age	Male aged 23 yrs
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Son of a Master Mariner.
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Allonby.
Whether First Attack	Yes.
Age (if known) on First Attack	Quite an infant
When and where previously under Care and Treatment	In 1854, in Colchester Asylum.
Duration of existing Attack	From Infancy
Supposed Cause	Fits
Whether subject to Epilepsy	Yes.
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	—
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	Mary Beeby. Allonby.

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

Signed, *Name,* (*) Dan Glaister
Occupation (if any), Ship Owner
Place of Abode, Maryport
Degree of Relationship (if any), or other circumstances of connexion with the Patient Trustee

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Joseph Pearson being a (a) Doctor of Medicine of the University of Edinburgh, a Member of the Royal College of Surgeons of England, and a Licentiate of the Apothecaries Hall, London and being in actual practice as a (b) a general Practitioner hereby certify that I, on the Seventh day of October at (c) Allonby in the County of Cumberland separately from any other Medical Practitioner, personally examined Daniel Beeby of (d) Allonby and that the said Daniel Beeby is a (e) Idiot and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

I have known him for many years as an Idiot, and know from my own observation, that he is almost quite incapable of mental cultivation.

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

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

see above

Signed, *Name,* Joseph Pearson M.D.
Place of Abode, Maryport

Dated this Seventh day of October One Thousand Eight Hundred and Sixty four

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, David Robison being a (a) M.D., Member of the Faculty of Phys. & Surgeons Glasgow and being in actual practice as a (b) General Practitioner hereby certify, that I on the 8 day day of Oct at (c) Allonby in the county of Cumberland separately from any other Medical Practitioner, personally examined Daniel Beeby of (d) Allonby and that the said Daniel Beeby is a (e) Idiot and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

I have known him to be an Idiot from almost his infancy, he can be taught nothing

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

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

Signed, *Name,* David Robison M.D., Surgeon
Place of Abode, Arkham — Aspatria

Dated this 8 day of Oct One Thousand Eight Hundred and Sixty four

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? By Birth

2. Where was the place of birth of the patient? Allonby

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Apoplectic attack in Infancy

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing Particularly observable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Commencing in 1854 two years and a half in Colchester Asylum

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. None

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the oldest and youngest would have attained, supposing them to have survived. Not Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Yes Epileptic

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Not that I am aware of

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? None

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About one year old

15. What has been the duration of the present attack?

Near twenty two years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Only once attacked Short of our Knowledge

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

None

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Most Annoyed by Music or any Shrill Noise

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Apt to break or Destroy when Excited

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Refuses Food Occasionaly
Occasionaly Liable to injure himself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Requires attention in every respect

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In Good Health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

In Colchester Asylum Ten years ago without benefit

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

All available attention without effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wm Glenister
Manford

No 1064. Mary Eliza Brookes.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.

2. Where was the place of birth of the patient? Leeds

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? None

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? At home

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. No occupation Regular conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Single

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Religious

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? None

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Yes Her Mother

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Not Known

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 23

15. What has been the duration of the present attack? 4½ months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

A slight attack of depression 12 months ago

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Complete

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Increasing depression

19. What were the first decided symptoms of mental aberration?

Imagined two friends had became enemies

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Singing hymns & quoting scriptures

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? no

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum? Cleanly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Good health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Mount Stead 3 months no alteration

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Lucid intervals at uncertain times

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Edwd Brooks
8 Booth Street
Bradford

No 1064.

Mary Eliza Brooks.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Eliza Brooks

whom I last saw at Shipley

on the twenty-sixth day of October (*)

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

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

Subjoined is a Statement respecting the said Mary Eliza Brooks

Signed, *Name,* Mary Jane Nichols

Occupation (if any), Governess

Place of Abode, 9 Summerseat Place

Degree of Relationship (if any), or other circumstances of connexion with the Patient No relation

Dated this ~~twenty-sixth~~ third Day of ~~October~~ November

One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Mary Eliza Brooks
Sex and Age	Female — age 23 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Spinster
Religious persuasion, as far as known	Independent
Previous Place of Abode	9 Summerseat Place
Whether First Attack	Second
Age (if known) on First Attack	Twenty two
When and where previously under Care and Treatment	Wood Head
Duration of existing Attack	Four months
Supposed Cause	Religious
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent.	Edward Brooks. 8 Booth Street. Bradford.

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

Signed, *Name,* (*) Mary Jane Nichols

Occupation (if any), Governess

Place of Abode, 9 Summerseat Place

Degree of Relationship (if any), or other circumstances of connexion with the Patient No relation

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned,
being a (a) Licentiate of the College of Physicians of London & a Member of the College of Surgeons of Edinburgh
and being in actual practice as a (b) Surgeon
hereby certify that I, on the twenty sixth day of October
at (c) Shipley
in the County of Yorkshire separately from any other Medical Practitioner,
personally examined Mary Eliza Brooks
of (d) 9 Summerseat Place Bradford and that
the said Mary Eliza Brooks
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

has no control over her mind = cannot converse upon any subject for more than one minute till burst out laughing = shouting — or crying when spoken to

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

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

From her father.

Constantly muttering to herself or singing Psalms or Hymns quoting passages of scripture laughing or crying without a cause

Signed, *Name,* I F Leeson FRCS MRCS

Place of Abode, Wellton House Bradford

Dated this twenty sixth day of October One Thousand Eight ~~four~~ Hundred and Sixty four.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned,
being a (a) Member of the Royal College of Surgeons and Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty sixth day of October 1864
at (c) Shipley
in the county of Yorkshire separately from any other Medical Practitioner,
personally examined Mary Eliza Brooks
of (d) 9 Summerseat Place Bradford and that
the said Mary Eliza Brooks
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Cries when spoken to, talks at random, laughs and shouts by turns
Notices nothing and looks incoherent

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

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

Will sit for hours without speaking to any one, muttering to herself lings parts of hymns and psalms, unconnectedly, and quotes texts of scripture incoherently. From her nurse

Signed, *Name,* Philip Edward Miall

Place of Abode, 57 North Parade Bradford

Dated this twenty-sixth day of October One Thousand Eight Hundred and Sixty four

No 1064. Mary Eliza Brooks.

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the fourth day of November
at (c) the house of John Clarke Heslington Road York
in the County of York separately from any other Medical Practitioner,
personally examined Mary Eliza Brooks 9 Summerseat Place
of (d) Bradford Yorkshire Spinster and that
the said Mary Eliza Brooks
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is incoherent, ~~the~~ can carry on no conversation & scarcely ~~and~~ answer correctly the simplest question

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

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

Signed, *Name,* William Procter
Place of Abode, 24 Petergate York
Dated this fourth day of November One Thousand Eight Hundred and Sixty four

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the fourth day of November 1864
at (c) the house of John Clarke Heslington Road York
in the county of York separately from any other Medical Practitioner,
personally examined Mary Eliza Brooks
of (d) 9 Summerseat place Bradford Yorkshire Spinster. and that
the said Mary Eliza Brooks
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Rambling incoherent conversation an inability to enter on any rational conversation

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

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

Signed, *Name,* J. W. North
Place of Abode, 31 Castlegate York
Dated this fourth day of Novr One Thousand Eight Hundred and Sixty four.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

on the day of (*)

a (b) as a Patient into your House.

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

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of

One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any) .....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment ....

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

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

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

Name and Address of Relative to whom Notice of Death to be sent.

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

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

No. 1065. Dan Saul.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? member by birth right

2. Where was the place of birth of the patient? Carlisle

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? do not know but believe not

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? a great share of natural understanding very precocious

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? We think so as to the first, fair extent of literary instruction, educated at Wigton School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. In Scale till 21 or 25 after that a Cotton Spinner industrious temperate regular conduct in youth & in part, fair so far as is known since

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. married, at 25 – five children, eldest 7½ youngest 2½ living

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Strong bias in political matters

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Great change have been very successful from 1857 to 1860 and been then lost all since

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? not Mathews side, do not know ask his mother one elder Brother imbecile for a time before his death supposed to be caused by epileptic fits

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? See 9

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Only about 5 weeks since

15. What has been the duration of the present attack? see above

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? first

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Great depression for 2 months

19. What were the first decided symptoms of mental aberration? Depression and incoherent expressions attended sometimes with very great remorse

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Chiefly on one heavy ruined himself his wife his children and various others, sometimes violent in his talk and meditated suicide

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? not observed

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

has often refused food

23. What are the habits of the patient as regards personal cleanliness and decorum?

Previous, clean & decorous but since this attack quite the reverse

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. complains of ~~back~~ pain in his back, and sometimes flashes of lighting in his head

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. no

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

no effect but

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

yes increasing, some lucid intervals, uncertain times and always worse after sleep

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Hodgkinson
On behalf of the Overseers of Manchester Pro Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Dan Saul

whom I last saw at his house this day

on the 5th day of 11th month 1864 (*)

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

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

Subjoined is a Statement respecting the said Dan Saul

Signed, Name, James Hodgkinson

Occupation (if any), Cotton Spinner

Place of Abode, Merton, Eccles nr Manchester

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Relation, Labourer

partner

Dated this fifth Day of 11th month

One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Dan Saul
Sex and Age	34. Male
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	Lost his all in his world was a cotton Spinner Merchant in trade with ingenious investments to be found of Spinners
Religious persuasion, as far as known	Friends
Previous Place of Abode	Swinton nr Manchester
Whether First Attack	yes
Age (if known) on First Attack	
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	about five 6 months
Supposed Cause	Reverses in business and unjustifiable investments which have not answered
Whether subject to Epilepsy	no
Whether Suicidal	Tendency that way
Whether Dangerous to others	yes at times
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Swinton Manchester nr Manchester His wife Sophia Saul or James Hodgkinson, Merton.

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

Signed, Name, (*) Geo Harrison

Occupation (if any), Stationer

Place of Abode, 11 Cripple Gate Manchester

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Intimate Personal friend but not related

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Daniel Downing being a (a) Surgeon & Licentiate of the Apothecaries Company & Medical Attendant upon Dan Saul & his Family and being in actual practice as a (b) Surgeon hereby certify that I, on the fourth day of November 1864 at (c) Kinglow Cottage, Old Lane Worsley in the County of Lancaster separately from any other Medical Practitioner, personally examined Dan Saul of (d) Kinglow Cottage and that the said Dan Saul is a (e) of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Extreme restlessness, incoherent language; imagining he has "irreconcilably" insulted his best friends; imploring total annihilation with suicidal tendencies —

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

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

Signed, *Name,* Daniel Downing
Place of Abode, Swinton Manchester

Dated this fifth day of November One Thousand Eight Hundred and Sixty four

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles John Farr being a (a) Surgeon and Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon hereby certify, that I on the fifth day of November 1864 at (c) Kinglow Cottage ~~Old Lane~~ Lane, Worsley in the county of Lancashire separately from any other Medical Practitioner, personally examined Dan Saul of (d) Swinton near Manchester and that the said Dan Saul is a (e) of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

His refusal to answer my questions, and restlessness with a general appearance of an unsound state of mind —

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

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

Great depression of spirits, frequently expressing a desire to cut his throat, or otherwise destroy himself — communicated by his wife

Signed, *Name,* Charles John Farr
Place of Abode, Swinton Manchester.

Dated this fifth day of November One Thousand Eight Hundred and Sixty four

No 1066. Fanny M Milner

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Sheffield County of York

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient: were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common: or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the oldest and youngest would have attained, supposing them to have survived.
22 years of age when Married Boy living 6 years old Little Girl died June 1863 aged about 6½ years

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Not that I am aware of

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Not since Marriage

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? has had hysterical fits at times

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? She has had severe attacks of vomiting with Diarrhea attended with ulceration of the Womb but her Mind was not at all affected by the former attack

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not to My Knowledge

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
This is the first attack and we know of no Cause except the disease named above

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 32 Years

15. What has been the duration of the present attack? about One Month

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

about 2½ Years ago She was thrown out of a Carriage which caused a Miscarriage since her health has from that time been More or less affected Causing sleepless nights — and at times further expressed in Speech

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The most permanent delusion appears to be that her husband is not true to her and that he seeks to put her from her home and also seeks her life and she is constantly talking in low whispers to supposed persons who are in the room

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She has only refused food One day but takes little or nothing to eat

23. What are the habits of the patient as regards personal cleanliness and decorum? Clean and orderly habits

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Answered as well

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Not

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

There are lucid intervals at uncertain times

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Charles Wilmer Lewis

No 1066.

Fanny M Milner

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Fanny Maria Milner whom I last saw at 33 Furgate Sheffield on the third day of December 1864 (*) a (†) Person of unsound Mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Fanny Maria Milner

Signed, *Name,* Charles Milner Senr
Occupation (if any), Ironmonger
Place of Abode, 33 Furgate Sheffield
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this third Day of December
One Thousand Eight Hundred and Sixty four

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Fanny Maria Milner
Sex and Age	Female Age Thirty five Years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Tradesmens Wife
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Sheffield
Whether First Attack	First Attack
Age (if known) on First Attack	Thirty five Years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	about a Month
Supposed Cause	Illness -
Whether subject to Epilepsy	Not aware
Whether Suicidal	Believe Not
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Charles Milner Senr 33 Furgate Sheffield

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

Signed, *Name,* (*) Charles Milner Senr
Occupation (if any), Ironmonger
Place of Abode, 33 Furgate Sheffield
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

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

I, the undersigned, William Leonard

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, *e.g.*, gen. —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine of the University of Edinburgh

and being in actual practice as a (b) physician

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

hereby certify that I, on the Thirtieth day of day of November 1864

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

at (c) No 33 Fargate Sheffield

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

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

personally examined Fanny Maria Milner

of (d) Fargate Sheffield wife of Charles Milner Ironmonger Junior and that

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

the said Fanny Maria Milner

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

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Uncontrolable excitement

Delusions as to her bodily functions, viz. false statements as to stoppage

Constant watchfulness

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

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

Attempts to go out at any hour night or day without sleeping

Express belief of being a great heiress

Capricious change of purpose

Signed, Name, William Leonard M.D.

Place of Abode, 2 Fargate Sheffield

Dated this Second day of December One Thousand Eight Hundred and Sixty four

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

I, the undersigned, John Hall

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, *e.g.*, gen. —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) M. R. C. S. Eng & L. S. A.

and being in actual practice as a (b) Surgeon

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

hereby certify, that I on the First day of December 1864

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

at (c) No 33 Fargate, Sheffield

in the county of York separately from any other Medical Practitioner,

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

personally examined Fanny Maria Milner

of (d) Fargate, Sheffield wife of Charles Milner and that

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

the said Fanny Maria Milner

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

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Constant Watchfulness.

Refusing to take food or answer questions

Speaks Incoherently

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

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

Attempting to leave the house without being dressed.

Imagining her husband going to be married at Sunderland

declares she is not Married to him

Signed, Name, John Hall

Place of Abode, Victoria St Sheffield

Dated this Second day of December One Thousand Eight Hundred and Sixty four

No 1067. Mabel Harker.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership - by birthright

2. Where was the place of birth of the patient?

Darlington

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing extraordinary

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Received a plain English education at a Day School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Domestic Servant - habits industrious, regular & temperate

7. If the patient be married, state at what age ~~his (or~~ her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Has never been married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No material change - her savings being small she is now partly dependent on her friends for support

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Scorbutic affection

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Parents entirely free - a brother slightly affected supposed to have arisen from a blow on the head now under private care in Wensleydale

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

No very observable cause - her complaint may have been predisposing (?) she has had some trouble lately in connection with a troublesome lodger, who refused to leave on receiving notice: this circumstance appears to have unpleasantly affected her mind

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

55 ~~55~~

15. What has been the duration of the present attack?

3 mos: very slight at first & progress of disorder very gradual

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

See above

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was much depression of spirits, general health not materially affected by this

19. What were the first decided symptoms of mental aberration?

Irritability with intervals of deep depression

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Great despondency - with violent intervals - throwing articles of furniture about the room, - striking her attendants - attempting to take - fear of robbers in the house &c

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Yes! has taken up the poker to strike attendants &c

22. Has the patient shown any disposition to refuse food, or to injure herself, and if so, in what way?

No disposition to refuse food - but decided inclination during seasons of depression to make an attempt on her life

23. What are the habits of the patient as regards personal cleanliness and decorum?

Fairly good - tho' of course less so than before the attack

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

No - troubled with a scorbutic affection

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Has not been in an asylum

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

The application of a blister behind the ear. Occasional sedatives at night -

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing - there are lucid intervals - recurrence of attacks uncertain

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Samuel Hare 16 Mt Pleasant Darlington

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mabel Harker of Darlington whom I last saw at her residence Darlington on the twenty fourth day of 12th month 1864 (a) a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Mabel Harker

Signed, *Name,* Samuel Hare
Occupation (if any), Accountant
Place of Abode, 16 Mt Pleasant Darlington
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Friend of Patient and Overseer of Darlington Monthly Meeting

Dated this twenty fourth Day of Twelfth Month One Thousand Eight Hundred and Sixty four.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Mabel Harker
Sex and Age	Female 56
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Now in retired life - formerly Domestic Servant
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Darlington - but for - few years at Stockton
Whether First Attack	Yes
Age (if known) on First Attack	53 - 56
When and where previously under Care and Treatment	—
Duration of existing Attack	About 3 mos
Supposed Cause	Anxiety
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	Yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	—
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	ann Harker 33 Archer St Darlington

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

Signed, *Name,* (c) Samuel Hare
Occupation (if any), Accountant
Place of Abode, 16 Mt Pleasant Darlington
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Friend of Patient

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, Fredrick Geo Clarkson —
being a (a) ~~Doctor of Medicine of the University of Saint Andrew's and Licentiate~~
~~of the Society of Apothecaries London.~~
and being in actual practice as a (b) General practitioner —
hereby certify that I, on the twenty third day of December 1864.
at (c) 33 Archer Street, Darlington
in the County of Durham separately from any other Medical Practitioner,
personally examined Mabel Harker
of (d) 33 Archer St. Darlington and that
the said Mabel Harker
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Great Restlessness of manner and impetuosity of disposition - Want of power to appreciate & press of reasons - At times Clenching of hands but signs this occasion being her present demeanor shows nervous & violent and impressed opinion - Attempts frequently to Scratch face about her nose frequently - F.C.C.

Has facts with the exception of violent and impressed opinion were discovered the date of Certificate. The previous occasion referred to was 5 or 6 weeks ago.

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

Communicated by Ann Harker her Sister who resides with her. (Patient declines to supply the or more satisfactory evidence.)

Violent Assault upon her sister who resides with her - Threats - Tendency to destroy Clothes by tearing or burning them - with other derangements from her ordinary habits -

Signed, Name, Fred. Geo. Clarkson

Place of Abode, Skerne bank House, Darlington.

Dated this twenty fourth day of December One Thousand Eight Hundred and Sixty four —

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

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

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

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

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

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

(f) *Here state the facts.*

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

I, the undersigned, John Rimington Fothergill
being a (a) Licentiate of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (b) General Practitioner
hereby certify, that I on the twenty fourth day of December 1864
at (c) 33 Archer Street Darlington
in the county of Durham separately from any other Medical Practitioner,
personally examined Mabel Harker
of (d) 33 archer St Darlington and that
the said Mabel Harker
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) She complains that she often feels depressed and miserable, that she is unable to sleep and is also subject to excitement by that she has not the same control over herself as formerly and is excessively irritated by comparatively slight causes. She admits having kicked her sister and also having threatened her with the poker, pair fender rest.

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

Ann Harker her sister informs me that she is often violent that she has struck her with her hands, kicked her, thrown sofa pillows ~~with~~ at her and attempted to strike her with the poker fender rest, chairs &c

Signed, Name, John Rimington Fothergill

Place of Abode, Darlington

Dated this 24th day of Dec. One Thousand Eight Hundred and Sixty four

No 1068. Elizabeth Lace

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elisabeth Lace

whom I last saw at Mr Nottingham's, Poppleton, York

on the twenty-fourth day of January 1865 (c)

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

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

Subjoined is a Statement respecting the said E. Lace

Signed, *Name,* Francis John Lace

Occupation (if any), Esquire J. P. for the West Riding of York

Place of Abode, Stone Gappe, Cop Hills, Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this twenty-fifth Day of January

One Thousand Eight Hundred and Sixty five.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Elisabeth Lace
Sex and Age	Female, aged 57
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious persuasion, as far as known	Member of the Church of England
Previous Place of Abode	Stone Gappe.
Whether First Attack	No
Age (if known) on First Attack	About 18
When and where previously under Care and Treatment	At Bolton Abbey in her Uncle's house.
Duration of existing Attack	15 months.
Supposed Cause	Failing health
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	F. J. Lace, Stone Gappe

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

Signed, *Name,* (c) F. J. Lace

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William Worth
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 30th day of January 1865
at (c) the house of Mrs Nottingham Poppleton near York
in the County of York separately from any other Medical Practitioner,
personally examined Elizabeth Lace the wife of F. J. Lace Esq
of (d) Stone Gappe Cross Hills Leeds and that
the said Elizabeth Lace
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Rattlepiece - rambling incoherent conversation an inability to sustain any connected conversation for more than a few minutes.

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

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

Signed, *Name,* S. W. Worth
Place of Abode, 31 Castlegate York

Dated this 30th day of January One Thousand Eight Hundred and Sixty five

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 30th day of Jany 1865
at (c) the house of Mrs Nottingham - Poppleton near York
in the county of York separately from any other Medical Practitioner,
personally examined Elizabeth Lace the wife of F. J. Lace Esq
of (d) Stone Gappe Cross Hills Leeds and that
the said Elizabeth Lace
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is rambling, irrational & incoherent in conversation - tells me that she is the ~~[illegible]~~ owner of all Yorkshire & 73 years of age

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

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

Her nurse informs me that at times she is very violent & uses obscene language

Signed, *Name,* William Procter
Place of Abode, 24 Petergate York

Dated this 30th day of Jany One Thousand Eight Hundred and Sixty five

No 1068.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.

2. Where was the place of birth of the patient? At North Grimston, near New Malton.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? There was nothing particular.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The affections were much cultivated in early life, the education perhaps neglected from a curvature in the Spine. She was educated entirely at home.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. To none.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married at the age of 20, she had 17 children.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? From Indigestion & pains.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? I think there is, tho' both Father & Mother were quite sane.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Cold taken on the age of puberty was perhaps the cause of the first attack. I cannot state the causes of those subsequent.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

170a

14. At what age was the patient first attacked with symptoms of insanity? At the age of 18.

15. What has been the duration of the present attack? 15 months more.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Four times. The 1st lasted, I have heard, 9 months. The 2d eight months. The 3d 9 months

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Yes. Eight years intervened between the 1st & 2d. nine between the 2d & third & twenty between the third & the present one

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? She had been out of health for a long time, suffering from indigestion & pharms, but there was no mental aberration till the attack was fully developed

19. What were the first decided symptoms of mental aberration? I can't remember, but I know that she was out of her mind.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Never in any Asylum.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Jam. F. J. Lace

No 1069. Eliza Bond.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Not a member of the Society of Friends, nor in any way connected with them

2. Where was the place of birth of the patient? New Malton, Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? She was of a timid and gentle disposition ~~ordinarily~~ unmarked by any eccentricity or peculiarity; The Mental power was of average Standard – No particular precocity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The understanding was cultivated in early life Education was Completed in a Seminary at Malton

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Brought up to no occupation ~~She was~~ naturally industrious temperate and of regular Conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. She was married in 1868 aged 25 years – she has four living Children she has had two premature Confinements –

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No. No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Circumstance are and always have been Comfortable

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Never had any particular illness always been very healthy –

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No hereditary disease admitted or known, two brothers have had ~~attacks~~ one attack of mental disorder –

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? She is now labouring under her first attack which is the result of debility caused by her Confinement on 8th Oct. 1864

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

1706

14. At what age was the patient first attacked with symptoms of insanity?

at the age of 32 years –

15. What has been the duration of the present attack?

about eight weeks –

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was a depression of Spirits for sometime – rather irritable sleep not very good – her digestive organs were much disordered –

19. What were the first decided symptoms of mental aberration?

Excitement with violence

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

during the attack she has imagined her Circumstances are involved at other times she has fancied she was for ever separated from her husband

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She has sometimes a tendency to self destruction

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She generally takes her food

23. What are the habits of the patient as regards personal cleanliness and decorum?

Personally clean and decorous –

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is in only moderate health, shewing evidence of general debility –

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never –

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Ordinary medical treatment and change of residence

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder seems stationary –

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Charles George Bond husband of the patient
7 Norton Grange. Malton.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mrs Eliza Bond

whom I last saw at The house at Norton Grange

on the sixth day of April 1865 (*)

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

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

Subjoined is a Statement respecting the said Eliza Bond.

Signed, *Name,* C G Bond

Occupation (if any), Bank Clerk

Place of Abode, Norton Grange Malton

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this seventh Day of April

One Thousand Eight Hundred and Sixty five

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Eliza Bond
Sex and Age	32 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Wife of C. G. Bond Bank Clerk
Religious persuasion, as far as known	Protestant
Previous Place of Abode	Yorkersgate. Malton
Whether First Attack	First attack
Age (if known) on First Attack	32 years
When and where previously under Care and Treatment	
Duration of existing Attack	about eight weeks
Supposed Cause	Confinement
Whether subject to Epilepsy	No.
Whether Suicidal	Yes
Whether Dangerous to others	sometimes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	C G Bond Norton Grange Malton

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

Signed, *Name,* (c) Charles George Bond

Occupation (if any), Bank Clerk

Place of Abode, Norton Grange Malton

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

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

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

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

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

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

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

I, the undersigned, Richard Soules of New Malton being a (a) Licentiate of the Royal College of Physicians of Edinbd member of the Royal College of Surgeons London & Licentiate of the Apothecaries Hall London and being in actual practice as a (b) Physicians hereby certify that I, on the Sixth day of April 1865 at (c) The Grange, Norton in the Borough of Malton in the County of York separately from any other Medical Practitioner, personally examined Eliza Bond / Married Lady / and that of (d) the said Eliza Bond is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Very excitable: dislikes her Nurse. Imagines she ought to die but cannot, and that she will live for centuries, imagines she has neither Money nor Clothes, imagines also she is not at her own Home and that her Husband estranged himself from her, and that she needs protection.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Very Violent and excitable: Violent at times towards others, obstinate & rude, and if not prevented likely to injure herself and others, suicidal. The above remarks also confirmed by those at present in attendance

Signed, *Name,* Richard Soules

Place of Abode, New Malton

Dated this Sixth day of April One Thousand Eight Hundred and Sixty five

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

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

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

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

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

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

I, the undersigned, Joshua Hartley of New Malton being a (a) Member of the Royal College of Surgeons London and Licentiate of the Apothecaries Hall - London and being in actual practice as a (b) general practitioner hereby certify, that I on the Sixth day of April 1865 at (c) Station Grange in the Borough of Malton in the county of York separately from any other Medical Practitioner, personally examined Mrs Eliza Bond of (d) Norton Grange in the Borough of Malton and that the said Mrs Eliza Bond is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) - She is irritable, and irregular in her ideas, she sometimes is excitable, sometimes sullen she is occasionally violent - shutting her nurse, she wishes to die but cannot, she says she never shall die - She blames herself has taken by her husband

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) because she is impure The nurse and her relations say - She thinks sometimes refuses food, that she wishes to be killed.

Signed, *Name,* Joshua Hartley. Surgeon

Place of Abode, Market Place. Malton

Dated this Sixth day of April One Thousand Eight Hundred and Sixty five

No 1074. Sarah A Lawrence

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 31st day of July 1865, of Sarah Ann Lawrence a Private Patient in Brooke House, Clapton to the Retreat ~~House~~, York.

Given under our hands this 13th day of July in the year of Our Lord One Thousand Eight Hundred and Sixty five.

R W S Lutwidge
Robert Navine
} Commissioners in Lunacy.

ORDER.

I,* George Gerard Lawrence the undersigned having Authority to discharge Sarah Ann Lawrence a Private Patient in Brooke House. Clapton hereby order and direct that the said Sarah Ann Lawrence be removed therefrom to the Retreat ~~House~~ York.

Given under my hand this* 14th day of July in the year of Our Lord One Thousand Eight Hundred and Sixty five.

(Signed) George G Lawrence

Place of Abode Springdale, Huddersfield

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

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

In cases of Chancery Patients—The Committee of the Person.

500 9 | 64—H & S
4539

15th

No. 1074.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Edward Harmace Maul being a (a) Licentiate of the Apothecaries Comp^y London and being in actual practice as a (b) apothecary hereby certify, that I, on the fifteenth day of February at (c) Shirley Parsonage in the County of Southampton separately from any other Medical Practitioner, personally examined Sarah Ann Lawrence wife of (d) Revd George J. Lawrence and that the said Sarah Ann Lawrence is a (e) of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Violently Screaming out and excitement of running about searching for her husband that hand eating in the larder without control

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Rushing thro a window where leaving the doors where locked

Signed, *Name,* Edward Harmace Maul

Place of Abode, Southampton

Dated this fifteenth day of Feby One Thousand Eight Hundred and Sixty one

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Henry Dayman being a (a) fellow of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I on the fifteenth day of February at (c) Shirley Parsonage in the County of Southampton separately from any other Medical Practitioner, personally examined Sarah Ann Lawrence wife of (d) The Revd George J. Lawrence and that the said Sarah Ann Lawrence is a (e) of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Loss of memory inability to speak collectedly on any subject sudden violence of speech does not know how to control her ordinary actions peculiar look of suspicions about the features

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) Wild delirium unable to realize the circumstances about her, or to fix her attention on any subject running distractedly about

Signed, *Name,* Henry Dayman

Place of Abode, Milbrook Southampton

Dated this Sixteenth day of February One Thousand Eight Hundred and Sixty one.

The enclosed is a correct copy of the order & Certificates upon which Mrs Lawrence was admitted into my house

Oh Burnett M.D

Westbrook House
Alton June 2nd 1863

This is to certify that the foregoing is a correct copy of the Order & Medical Certificates received with Mrs. Lawrence at the time of her admission to Westbrook House. Alton.

Gideon G. Gardiner. M.D.
July 14. 1865.

(e) House or hospital.

(f) If a private patient received upon one certific only, the special circumstanc which have prevented patient from being examin by two medical practitioners be here stated, as in the stat ment accompanying the ord for admission.

(g) Superintendent or pro prietor of ——.

Lunatics I.
(16 & 17 Vict. c. 96, sched. B. IX.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SON
Fetter Lane.

NOTICE OF ADMISSION.

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

I hereby give you Notice, That

.

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

Day of 186 , and I hereby

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

received (b).

(a) House or hospital.

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

Signed, _____

(c) _____

_____

(c) Superintendent or proprietor of ——.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy

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

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

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

I, the undersigned, hereby request you to receive Sarah Ann Lawrence whom I last saw at

on the _____ day of _____ (a)

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

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

Subjoined is a Statement respecting the said Sarah Ann Lawrence

Signed, *Name,* George J. Lawrence
Occupation (if any), Clergyman
Place of Abode, Shirley
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this fifteenth Day of February One Thousand Eight Hundred and Sixty one

To Dr. Bonnell
(c) proprietor of (d) Westbrook House

(c) Proprietor or superintendent of.
(d) Describing the house or hospital by situation and name if any.

STATEMENT.

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

Name of Patient, with Christian Name at length	Sarah Ann Lawrence
Sex and Age	Female Thirty Six
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Wife of Clergyman Woman of England
Religious Persuasion, as far as known	
Previous Place of Abode	Parsonage Shirley
Whether First Attack	no
Age (if known) on First Attack	about twenty
When and where previously under Care and Treatment	at home
Duration of existing Attack	Three weeks
Supposed Cause	Confinement
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	

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

Signed, *Name,* (e) George J. Lawrence
Occupation (if any), Incumbent of Shirley
Place of Abode, Shirley
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

No. 1070. John Watson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Member by birthright

2. Where was the place of birth of the patient?

Sheldon near Allendale Town Northumberland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing known peculiar whatever

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

His disposition was kind & affectionate, not marked by any peculiarity his understanding naturally rather above than otherwise

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Plain Education principally at Wigton Cumberland

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Until 22 years of age in his Father's Shop afterwards upwards 20 years in a Bank as Clerk lately not in any employment Habits Temperate and perfectly regular in Conduct through life

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

never Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Has not been engaged in any particular pursuit but takes delight in the Country &c. Flowers

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

A few years ago he entered into Business in which he was unsuccessful but this did not apparently affect him much

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Some years ago he was troubled with Gravel Complaint upwards of 20 years ago had a violent fall from his horse causing concussion of the Brain

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No hereditary disease we have any of his blood relations been known to be insane

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The remote Cause was a fall from his horse In the first attack he caught cold which affected his Chest The present attack is supposed to be caused by a Marriage engagement unprudently entered into not having means to enable him to fulfill it.

The engagement has been of 5 years duration

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

36 years

15. What has been the duration of the present attack?

about 6 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Once before duration about 2 months former attack very similar to the present

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

The recovery from the first attack was complete

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing unusual

19. What were the first decided symptoms of mental aberration?

In both cases an impression that he only had a certain time to live

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Obviously affected no permanent delusions in the early part of this attack frequent fits of weeping & depression afterwards alternating with seasons of moodiness and irritability

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

None

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

When in health very particular in both respects

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

His digestive organs and sexual are much out of order otherwise he is in pretty good health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Was in a private asylum once 14 years ago 6 or 7 weeks from which his recovery was complete

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Various medicines have been given him with no particular success

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disease is now about stationary

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

William Watson
Brentwick Villas Sussex Cathedral Square

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Watson

whom I last saw at Bentinck Villas Newcastle on Tyne

on the seventh day of 11th Month 1865 (*)

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

Subjoined is a Statement respecting the said John Watson

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

Signed, *Name,* William Watson

Occupation (if any), Tea Dealer &c

Place of Abode, Bentinck Villas Newcastle on Tyne

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 7th Day of 11th Month 18

One Thousand Eight Hundred and Sixty five

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	John Watson
Sex and Age	50 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	not in any employment previously Blacksmith
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Bentinck Villas
Whether First Attack	Second attack
Age (if known) on First Attack	36 years
When and where previously under Care and Treatment	Dunston near Gateshead 1851
Duration of existing Attack	about 6 weeks
Supposed Cause	Fall from his horse
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	William Watson

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

Signed, *Name,* (*) William Watson

Occupation (if any), Tea Dealer

Place of Abode, Bentinck Villas Newcastle on Tyne

Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle

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

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

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

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

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

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

I, the undersigned, John F. Kennedy being a (a) Surgeon Secretary of Faculty of Physicians & Surgeons L.F.P.S.G. and being in actual practice as a (b) Surgeon hereby certify that I, on the Seventh day of April 1865 at (c) Benton Villas Newcastle Northumberland in the County of Newcastle separately from any other Medical Practitioner, personally examined Sir John Watson Baronet of Benton Villas Newcastle and that of (d) Baronet & Surgeon Sir John Watson the said Physician is a (e) of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Her inability to concentrate his mind on any subject for any time & frequent rambling or various topics & mistaking objects & Jobs of considerable excitement —

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

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

He gets up at night in the belief that his relations in the house are dead & his brother has poisoned them

His information is obtained from his wife & brother Mr Watson and Mary Watson

Signed, John F. Kennedy

Name, John F. Kennedy Surgeon L.F.P.S.G.

Place of Abode, 2 Elder Square Newcastle on Tyne

Dated this Seventh day of April One Thousand Eight Hundred and Sixty Five

I saw Sir John Watson at the same time as Dr Kennedy & concur in the opinion that he is of unsound mind & a proper person to be taken charge of & detained under care & treatment

John F. Kennedy

Licentiate of the Faculty of Physicians & Surgeons Glasgow

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

Fellow of the Royal College of Surgeons of England

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

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

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

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

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

I, the undersigned, John Fitzl being a (a) Surgeon F.R.C.S. England and being in actual practice as a (b) Surgeon hereby certify, that I on the Seventh day of April 1865 at (c) Benton Villas Newcastle in the county of Northumberland separately from any other Medical Practitioner, personally examined Sir John Watson Bart of Benton Villas Newcastle and that of (d) Baronet & Surgeon Sir John Watson the said is a (e) of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Expression of Eye & Wandering State of thought & Expression. Contradictory Views

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

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

Conforming of Patient 20 years ago & Confinement for an Asylum for Insanity Six years after that

Sir W Watson Brother & John Watson his informed me that he & John Watson Starts up occasionally at night imagining that he has taken Poison.

Signed, John Fitzl M.A.s F.R.C.S.

Name, John Fitzl M.A.s F.R.C.S.

Place of Abode, Newcastle on Tyne

Dated this Seventh day of April One Thousand Eight Hundred and Sixty Five

The above History of Case afforded by Mr William Watson

John Fitzl F.R.C.S. England

John Fitzl Master of Arts of Durham. Fellow of the Royal College of Surgeons of England Member of the Royal Medical Society of Edinburgh Senior Surgeon to the Newcastle Infirmary. Consulting Surgeon to the Eye Infirmary

This is to certify that I have this day seen Miss E M Whitehead and find sufficiently well to remain out of the Retreat, at York & indeed without control.

Henry Rush
M.R.C.S. & L.S.A.

Wethersfield Braintree
Nov.r 1st 1869

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No 1071. Elizabeth M Whitehead.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Mary Whitehead whom I last saw at Lutchington Farm House on the Twelfth day of 4th month 1865, (*) a person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Elizabeth Mary Whitehead

Signed, Name, Joseph Whitehead
Occupation (if any), Miller & Farmer
Place of Abode, Stebbing Essex
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Uncle

Dated this Twelfth Day of 4th month
One Thousand Eight Hundred and Sixty Five.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Elizabeth Mary Whitehead.
Sex and Age	Female. aged 28 years.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	In domestic life at home.
Religious persuasion, as far as known	Society of Friends.
Previous Place of Abode	Lutchington
Whether First Attack	First Attack. Had St Vitus' dance at School.
Age (if known) on First Attack	28 yrs.
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	About 6 months.
Supposed Cause	Visiting her mother at an Asylum.
Whether subject to Epilepsy	No.
Whether Suicidal	No — but once had a rope in her bedroom.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	James Whitehead. 100 Quay. Waterford.

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

Signed, Name, (c) Joseph Whitehead
Occupation (if any), Miller & Farmer
Place of Abode, Stebbing
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Uncle.

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

I, the undersigned, James Brooks Easton

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

being a (a) Surgeon & Apothecary ~~Surgeon & Apothecary~~

and being in actual practice as a (b) ~~Licentiate~~

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

hereby certify that I, on the tenth day of April 1865

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

at (c) Latchingdon

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

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

personally examined Elizabeth Mary Whitehead

of (d) Latchingdon and that

the said Elizabeth Mary Whitehead

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

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

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) running about the fields without bonnet or shoes on, carrying down Hairs in her nightdress. incoherent answers to questions &c

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) sitting her scratch on the key house for a week past of giving too many things away to beggars coming to the door. Information received from Robn Barrett.

Signed, J B Easton. M.R.C.S. & L.A.C

Name, James Brooks Easton

Place of Abode, Stebbing Essex

Dated this 10th day of April One Thousand Eight Hundred and Sixty five.

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

I, the undersigned, George Parker Gray

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

being a (a) Doctor of Medicine of the University of Edinburgh

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

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

hereby certify, that I on the ~~tenth~~ day of April 1865

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

at (c) Latchingdon

A Farm House

in the county of Essex separately from any other Medical Practitioner,

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

personally examined Elizabeth Mary Whitehead

of (d) Latchingdon and that

the said Elizabeth Mary Whitehead

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

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

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) General deficient & demeanour restlessness at dinner table — Opening the Window & leaving down & Knowing at Honeysuckle Cushion Gait without Bonnet & running over fields at 9 o'clock from home. delusion in belief that a Mother Child

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) pumping water in her night dress. Breaking into the house Breaking Glass purposely. Communicated by her Uncle Mr Robt Barrett

Signed, G P Gray M D

Name, George Parker Gray

Place of Abode, Near Town Maldon

Dated this tenth day of April One Thousand Eight Hundred and Sixty five

No. 1071. Eliz[a] M Whitehead

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? a member.

2. Where was the place of birth of the patient? Stratford. Essex.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? had St Vitis dance when about 13 years old.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? nothing more than other young people.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? educated at Croydon.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. brought up in a domesticated manner at home! conduct good and up to the time of her affliction.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Single!

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No!

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No!

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No!

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? none but that stated above.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? the mother is in an Asylum at Dublin.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? after seeing her mother at Dublin.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? about her 28 year.

15. What has been the duration of the present attack? 9 months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? first attack!

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? No!

19. What were the first decided symptoms of mental aberration? wandering about from place to place

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
keeping abed for days together and when up roving about the fields without a bonnet or frock she often talks of seeing people who have been dead many years

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
No wholesome!

23. What are the habits of the patient as regards personal cleanliness and decorum? cleanly & tidy

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Never has been!

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
She always enjoys good bodily health

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
increasing and changeable

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joseph Whitehead
Hebbing Mill Essex

No 1072. Lucia Bateson.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Lucia Bateson whom I last saw at Wallasea Cheshire on the Eleventh day of May 1865 (*) a person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said Lucia Bateson

Signed, *Name,* W. H. Bateson
Occupation (if any), Master of St. John's Colly
Place of Abode, Cambridge
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Eleventh Day of May
One Thousand Eight Hundred and Sixty Five.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Lucia Bateson
Sex and Age	Female - aged 44 years.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	A Lady.
Religious Persuasion, as far as known	Church of England.
Previous Place of Abode	Wallasea - Cheshire.
Whether First Attack	No.
Age (if known) on First Attack	About 17 years.
When and where previously under Care and Treatment	The Retreat York & other places.
Duration of existing Attack	About a fortnight.
Supposed Cause	Unknown. A Fire in the house.
Whether subject to Epilepsy	No.
Whether Suicidal	Has fear at rare intervals.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Dr Bateson. St John's College. Cambridge.

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

Signed, *Name,* (c) W. H. Bateson
Occupation (if any), Master of St. John's Colly
Place of Abode, Cambridge
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Isaac Byerley of Surgeons and a Licentiate being a (a) Fellows of the Royal College of Apothecaries Hall, London and being in actual practice as a (b) Surgeon hereby certify that I, on the Eleventh day of May at (c) Newlands Liscard in the County of Chester separately from any other Medical Practitioner, personally examined Lucia Bateson of (d) Liscard and that the said Lucia Bateson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Has been alternately in high thoughts for some days - as in former attacks - so now understand Exalted - breaking articles of furniture - uses rash language at times and at others quotes Scripture - Has written letters to the Queen - Louis Napoleon & others - so altogether uncontrolable -

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) - Has cursed Lazors - and formerly attempted Self-destruction.

Signed, *Name,* Isaac Byerley
Place of Abode, Seacombe - Cheshire

Dated this Eleventh day of May One Thousand Eight Hundred and Sixty five.

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

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Batty being a (a) Member of the Royal College of Surgeons and Licentiate of the Apothecaries Hall, London and being in actual practice as a (b) Surgeon hereby certify, that I on the Eleventh day of May at (c) Newlands, Liscard in the county of Chester separately from any other Medical Practitioner, personally examined Lucia Bateson of (d) Liscard and that the said Lucia Bateson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Is violent in language & manner, Can speak to Quotes Scripture, but never speaks rationally upon any subject -

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

2. Other facts (if any) indicating Insanity communicated to me by others (g) has written letters to the Queen, Louis Napoleon and others, has been violent and uncontrolable -

Signed, *Name,* Thomas Batty
Place of Abode, Liscard

Dated this eleventh day of May One Thousand Eight Hundred and Sixty five -

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

W. H. Bateson
St John's College
Cambridge

No 1072.

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

Lucia Bateson

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.

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

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

(d) *A. B. of*——. *Insert residence and profession, or occupation (if any).*

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

I, the undersigned, Isaac Byerley being a (a) Fellow of the Royal College of Surgeons and a Licentiate of Apothecaries Hall London and being in actual practice as a (b) Surgeon hereby certify, that I, on the Eleventh Day of May at (c) Liscard in the County of Chester separately from any other Medical Practitioner, personally examined (d) Lucia Bateson.

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

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Has been alternately in high and low Spirits for some days - as in former attacks - is now violent and excited - breaking articles of furniture - uses bad language at times and at others quotes Scripture - Has written letters to the Queen - Is altogether uncontrolable -

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

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

such as have been observed by myself - has secreted razors - and formerly made attempts upon her life -

Signed, Name, Byerley

Place of abode, Segrambe - Cheshire

Dated this Eleventh Day of May One Thousand Eight Hundred and Sixty five

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London.

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

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

(d) *A. B. of* ——. *Insert residence and profession, or occupation (if any).*

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

I, the undersigned, Thomas Batty College being a (a) Member of the Royal College of Surgeons and Licentiate of the Apothecaries Hall London and being in actual practice as a (b) Surgeon hereby certify, that I, on the 11th Eleventh Day of May at (c) Liscard in the County of Chester separately from any other Medical Practitioner, personally examined (d) Lucia Bateson.

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

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Is violent in language & manner, does not attempt to quote Scripture, but never speaks rationally upon any subject -

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

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

Has written letters to the Queen, Louis Napoleon & others, has been disruptive violent & uncontrolable -

Signed, Name, Thomas Batty

Place of Abode Liscard, Cheshire

Dated this 11th Eleventh Day of May One Thousand Eight Hundred and Sixty five -

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NOTICE OF ADMISSION.

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

I hereby give you Notice, That

was admitted into this Asylum as a Private Patient, on the . Day of 186 and I hereby transmit a Copy of the Order and Statement and Medical Certificate on which he was received (*a*).

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

Signed, _____

(*b*) Clerk of——Asylum. (*b*) _____

_____ _____

Dated the Day of

One Thousand Eight Hundred and Sixty

To the _____

Lunatics 11.
(16 & 17 Vict. c. 97, Sched. F.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

No 1072

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (F) No. 2.

I, the undersigned, hereby request you to receive Lucie Bateson whom I last saw at Newlands Lucand on the eleventh day of May (a) a (b) person of unsound mind as a Patient into your Asylum.

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

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

Subjoined is a Statement respecting the said

Signed, *Name,* James Glynne Bateson

Occupation (if any), Cotton Broker

Place of Abode, Lucand Mount New Brighton

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this eleventh Day of May

One Thousand Eight Hundred and Sixty five.

To Mr. T. S. Haycock.

Superintendent of the Asylum for the (c) Insane

14 Ashton Street Liverpool.

(c) *Describing the asylum.*

STATEMENT.

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

Name of Patient, with Christian Name at length	Lucie Bateson
Sex and Age	Female aged 43 years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	none
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Newland Lucand Cheshire
Whether First Attack	yes
Age (if known) on First Attack	unknown
When and where previously under Care and Treatment	The Brook Asylum or Liverpool The Retreat, Yorkshire and at the Liverpool Royal Lunatic Hospital
Duration of existing Attack	14 Ashton Street Liverpool
Supposed Cause	Unknown
Whether subject to Epilepsy	yes
Whether Suicidal	yes
Whether Dangerous to others	yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	yes
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	James Glynne Bateson Lucand Mount New Brighton

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

Signed, *Name,* (d) James Glynne Bateson

Occupation (if any), Cotton Broker

Place of Abode, Lucand Mount New Brighton

Degree of Relationship (if any) or other circumstances of connexion with the Patient Brother

No 1073. Edw.d Dodshon.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A member, by birthright.

2. Where was the place of birth of the patient?

Sunderland.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

A twin.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

A delicate constitution. Nothing striking otherwise.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Was of an affectionate disposition. Education for 4 or 5 years at a good day school, & at Henry Tolsons, Kendal for one year. Afterwards was at the Friends' Academy at York for about two years.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

To his Father's business (chemist & druggist.) At first for about three years attended to it, but since, habits very irregular as to industry, temperance &c.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Lately, on account of his extravagance, has been limited in pecuniary matters which he has felt much. Also has been disappointed as a suitor [illegible]

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Never.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Never had any serious illness. Only the usual complaints of childhood, which he passed through favourably.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Immoral conduct for how long a period unknown, probably for about four years; & his rejection by the young woman. Causes of this & a former attack a few weeks since

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

Twenty four years of age

15. What has been the duration of the present attack?

A week

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

He had one former attack about 5 weeks since. At this time he attempted to shoot himself with a pistol & the ball was taken from him by force but he threatened to kill himself. This lasted for the time & it did not last long

17. Were the intervals of sanity between the previous attacks, if any, complete? and what was their duration?

The interval between the previous & present attack was not complete.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

For years has been extremely irritable, & could not by any means be induced to leave from bed before noon

19. What were the first decided symptoms of mental aberration?

Can hardly ~~mention~~ remember. Probably ever since he became attached to the young woman (about 2 years since) he has been slightly affected

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Dwells particularly on the subject of his marriage with the person who has rejected him & on destroying himself or some other person.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has been extremely violent during this attack & threatened people around him - especially nurse -

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Does not refuse food - Though he says he wishes to kill himself does not really injure himself. He tried to do it through abstinence.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Particularly neat & gentlemanly -

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In a debilitated condition and suffering from gonorrhœa.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

At the early period of the attack, depressants with some positive effect. Since recently - nutrition food and gentle stimulants with sedatives, which however he objects to take and has not therefore taken regularly

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The more acute symptoms observed at first are subsiding, but the bodily, mental & disorder is not decreasing. There are no absolutely lucid intervals though the disorder is to some extent characterized by remissions and exacerbations, which occur irregularly.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Edward Dodshon

No 1073. 1073. Edwd Dodshon

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Edward Dodshon Junr.

whom I last saw at Salem St Bishopwearmouth

on the 27th day of June — 1865 (a)

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

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

Subjoined is a Statement respecting the said Edward Dodshon Jr.

Signed, Name, Edward Dodshon

Occupation (if any), Chemist & Druggist

Place of Abode, Bishopwearmouth

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Patients Father

Dated this Twenty seventh Day of June 1865

One Thousand Eight Hundred and Sixty five

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	Edward Dodshon (Jr
Sex and Age	male Twenty four
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Druggist Assistant
Religious persuasion, as far as known	Soc. Friends
Previous Place of Abode	Bishopwearmouth
Whether First Attack	First attack more mild about 5 wks since recurring last week
Age (if known) on First Attack	Twenty four
When and where previously under Care and Treatment	not previously treated
Duration of existing Attack	about a week
Supposed Cause	disappointment & misconduct
Whether subject to Epilepsy	not subject
Whether Suicidal	suggested but not attempted
Whether Dangerous to others	dangerous if not restrained
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	not so found
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent.	Edward Dodshon 7 Salem St Bishopwearmouth

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

Signed, Name, (c) Edward Dodshon

Occupation (if any), Chemist & Druggist

Place of Abode, 7 Salem St Bishopwearmouth

Degree of Relationship (if any), or other circumstances of connexion with the Patient } patients Father

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, George Welford being a (a) Member of the Royal College of Surgeons and Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon and Apothecary hereby certify that I, on the Twenty fifth day of June at (c) 7 Bishopwearmouth in the County of Durham separately from any other Medical Practitioner, personally examined Edward Dodshon Junr of (d) 7 Salem Street Druggist and that the said Edward Dodshon Junr is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
From his violent conduct: incoherent conversation & total inability to sustain a connected conversation relating one he was Oliver Cromwells head that there would have to be a new devil &c

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

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

Signed, *Name,* George Welford
Place of Abode, 29 John Street

Dated this Twenty sixth day of June — One Thousand Eight Hundred and Sixty five

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

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, George Stevenson Brady being a (a) Member of the Royal College of Surgeons of England and Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon hereby certify, that I on the twenty-sixth day of June at (c) 7 Salem Street, Bishopwearmouth in the county of Durham separately from any other Medical Practitioner, personally examined Edward Dodshon Junr of (d) 7 Salem Street, Chemist & Druggist and that the said Edward Dodshon Junr is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Mental delusions. Says that he has "changed souls with somebody". Generally incoherent conversation.

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Occasion violence to attendants. Threats of suicide, murder &c

Signed, *Name,* George S. Brady
Place of Abode, 22 Fawcett Street, Bishopwearmouth

Dated this twenty second day of June One Thousand Eight Hundred and Sixty five.

No 1074. Sarah Ann Lawrence.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No -

2. Where was the place of birth of the patient? Sheffield -

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No -

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Active, particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Education at home -

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Resided in her father's house

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Thirty one - One child aged five & a half -

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
Once before. the last time about seventeen years ago.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Yes -

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
First attack mental anxiety
Second - birth of a child -

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

about fifteen

15. What has been the duration of the present attack?

Five years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Twice -

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Yes - Several years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No -

19. What were the first decided symptoms of mental aberration?

great mental depression of a morbidly religious character

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Delusions have almost subsided. but she is still subject to occasional fits of uncontrollable excitement.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Much improved -

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Good -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Twice with Dr. Barnett at Alton
Then with Drs. Monro & Gardner at Brooke House Clapton

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Declining

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Rev. G. J. Lawrence
Springdale
Huddersfield

No 1075. James Lindsey.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? In membership, by birthright

2. Where was the place of birth of the patient? Brighouse Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Eccentricity, Stammering in speech, excitability, & weakness of mind

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? No particular cultivation

Educated at Ackworth, & Penketh School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Never willing to settle in any business, Indolent, Temperate in drinking good moral Conduct, but irritable, & temper sometimes ungovernable.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not been married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

A desire to marry, has sometimes prevailed

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

An aunt who had the brain fever, was afterwards placed under care for some time.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Causes Unknown

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

A change took place in his conduct when 12 years old

15. What has been the duration of the present attack? Three or four months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Many times, & of some months duration In the form of dissatisfaction with things around him, and strong opposition to some order & decide for seclusion, and dislike for new modes.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Not complete on all points. From 6 weeks to 12 months

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

nothing peculiar observable, until he came home, after being at Ackworth School, when he seemed unable to defend himself, (teased by the boys) & was ill

19. What were the first decided symptoms of mental aberration?

Excitability, and throwing off parental restraint.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

An unwillingness to settle to business or fixed employment. The patient generally takes a decided dislike without any just cause, to some person around him Thinks he is to be a great man, in the religious world, & to reform men,

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Prone to violence when greatly excited. He has frequently alarmed those around him, and at times attempted to injure others ~~others~~

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No — No —

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly, & Methodical, to an extreme

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Apparently in good bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Not been in any Asylum or Hospital

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

No Medical means, But conciliatory

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder seems to become more fixed, There are many lucid intervals Very changeable, at all times; & soon irritated, No stated periods

has been troublesome in meetings for worship

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

To Sarah Lindsey
Pole
near Manchester

No 1075. James Lindsey.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Lindsey whom I last saw at York on the 21 day of the 7th month (July) 1865 (a) as a (b) person of unsound mind as a Patient into your House.

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

Subjoined is a Statement respecting the said James Lindsey

Signed, *Name,* Sarah Lindsey
Occupation (if any), Not in business
Place of Abode, Sale near Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this 21 Day of the 7th month, 1865
One Thousand Eight Hundred and Sixty 5

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

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

Name of Patient, with Christian Name at length	James Lindsey
Sex and Age	30 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Not in business, no settled previous occupation
Religious persuasion, as far as known	The Society of Friends
Previous Place of Abode	Various
Whether First Attack	Not first attack
Age (if known) on First Attack	About 12 years
When and where previously under Care and Treatment	No particular place
Duration of existing Attack	Three or Four Months
Supposed Cause	No particular thing, but an aversion to confinement
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	At times when excited
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Sarah Lindsey, Sale near Manchester

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

Signed, *Name,* (c) Sarah Lindsey
Occupation (if any), Not in trade
Place of Abode, Sale near Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the 18th day of July 1865 at (c) 31 Castlegate York in the County of York separately from any other Medical Practitioner, personally examined James Lindsey of (d) Sale near Manchester & no occupation and that the said James Lindsey is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
He is imbecile, a vacant expression of countenance an inability to sustain any conversation of a connected kind, & extreme ~

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
His Mother informs me that he has been subject to fits of any description & that he is at times much excited.

Signed, James William North

Place of Abode, 31 Castlegate York

Dated this 24th day of July One Thousand Eight Hundred and Sixty five

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

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Potter being a (a) Member of the College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the 24th day of July 1865 at (c) 24 Petergate - York in the county of York separately from any other Medical Practitioner, personally examined James Lindsey of (d) Sale near Manchester & no occupation and that the said James Lindsey is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) His manner is imbecile - his replies to questions are vague & often irrelevant. He fancies that he is able to foretell the day of his death

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

2. Other facts (if any) indicating Insanity communicated to me by others (g)
His mother tells me that he is very occasionally uncontrollable & at times violent

Signed, William Potter

Place of Abode, 24 Petergate - York

Dated this 24th day of July One Thousand Eight Hundred and Sixty five

No. 1076. Eliza Ellis.

The Certificate need not be drawn up or dated on the day of examination, but the Patient must be examined within seven clear days prior to admission.

I, the undersigned being a[1] Fellow of the Royal College of Physicians in London

and being in actual practice as a[2] Physician hereby certify that I on the twenty first day of July 1865 at[3] Woodhouse Brand, in the Parish of Woodhouse Eaves in the County of Leicester separately from any other Medical Practitioner personally examined Eliza Ellis of[4] Belgrave, Leicestershire Gentlewoman and that the said Eliza Ellis is a[5] person of unsound mind and a proper Person to be taken charge of and detained under care and treatment; and that I have formed this opinion on the following grounds, viz.:—

1. Facts indicating Insanity observed by myself.[6]

Great incoherence of language, violence, threatening violence to myself, religious delusions, fully impressed with the belief of having committed crimes of a strange nature — belief that dogs eats a impure animals and her body

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

Wandering out at night threatening violence to herself & others, belief that her soul is lost, that she had committed great crimes, is very incoherent in language. These facts are communicated to me by her sisters, her brother, & the nurses

Dated this 21 day of July
One thousand eight hundred and sixty five

Name ... ... Gray Shaw
Place of abode New Street Leicester

I, the undersigned being a[1] Member of the Royal College of Surgeons in London

and being in actual practice as a[2] Surgeon and Apothecary hereby certify that I on the twenty first day of July 1865 at[3] Woodhouse Brand Cottage in the parish of Woodhouse Eaves — Leicester separately from any other Medical Practitioner, personally examined Eliza Ellis of[4] Belgrave Spinster and that the said Eliza Ellis — is a[5] person of unsound mind — and a proper Person to be taken charge of and detained under care and treatment; and that I have formed this opinion on the following grounds, viz:—

1. Facts indicating Insanity observed by myself.[6]

Incoherent talk violence of conduct impure and unnatural expressions of imputed crime sleeplessness and any destructive in her habit religious delusions and dangerous to others

2. Other facts (if any) indicating Insanity communicated to me by others.[7]

At this moment so violent as to require powerful restraint suicidal in the manner and disposition — communicated by her Sisters Brother & attendants

Dated this 21st day of July
One thousand eight hundred and sixty five

Name ... ... Charles Walker Wood
Place of abode Woodhouse Eaves Loughbro

1 Here set forth the Qualification entitling the person certifying to practice as a Physician, Surgeon, or Apothecary, as yes. "being a fellow of the Royal College of Physicians in London."
2 Physician, Surgeon, or Apothecary, as the case may be.
3 Here insert the Street, and Number of the House (if any) or other like Particulars.
4 Insert residence, and profession, or occupation of the Patient.
5 A Lunatic or an Idiot, or a Person of unsound Mind.
6 Here state the Facts.
7 Here state the Information, and from whom received.

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PRIVATE PATIENT.

LEICESTERSHIRE AND RUTLAND LUNATIC ASYLUM.

I hereby give you Notice, That

was admitted into this Asylum, as a Private Patient, on the

day of 186 and I hereby transmit a Copy of the Order and

Statement and Medical Certificates on which he was received.

(Signed) _____

Clerk of the Leicestershire and Rutland Lunatic Asylum.

Dated this day of

One thousand eight hundred and sixty

[1] Name of Patient.

I, the undersigned, hereby request you to receive[1] Eliza Ellis whom I last saw at Woodhouse Beards on the 22nd day of July, 1865 [2] as a Patient, into your Asylum.

[2] Within one month previous to the date of the order.

[3] A Lunatic, or an Idiot, or a Person of unsound Mind.

Subjoined is a Statement respecting the said Eliz Ellis

(Signed) Name ... ... Edward Shipley Ellis
Occupation (if any) ... The Remarke
Place of Abode ... Leicester

Degree of Relationship (if any), or other circumstances of connexion with the Patient ... ... Brother

Dated this Twenty Second *day of* July
one thousand eight hundred and sixty five

To the SUPERINTENDENT of the Retreat, York

[redacted]

STATEMENT.

If any Particulars in this Statement be not known, the Facts to be so stated.

Name of Patient, with Christian Name at length ... Elyza Ellis
Sex and Age ... ... Female 40
Married, Single, or Widowed ... ... Single
Condition of life, and previous occupation (if any)... Gentlewoman
Religious Persuasion as far as known ... ... Society of Friends
Previous Place of Abode ... ... Belgrave nea Leicester
Whether first Attack ... ... no, the second,
Age, (if known,) on first Attack ... ... thirty one
When and where previously under care and Treatment ... ... at Belgrave at home
Duration of existing Attack ... ... about eight Days
Supposed Cause ... ... uterine
Whether subject to Epilepsy... ... ... no
Whether suicidal ... ... yes
Whether dangerous to others ... ... yes
Whether found Lunatic by Inquisition, and date of Commission or Order for Inquisition ... no
Special circumstances (if any) preventing the Patient being examined, before Admission separately, by two Medical Practitioners ... none
Name and Address of Relative to whom Notice of Death to be sent ... ... Edward Shipley Ellis

[4] Where the Person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

(Signed). Name,[4] ... Edward Shipley Ellis
Occupation (if any)... ... The Remarke
Place of Abode ... ... Leicester

Degree of Relationship (if any,) or other circumstances of connexion with the Patient ... Brother

No 1077. Catherine Fisher

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Not a member, but her aunt was when living, and several of her cousins at present are members of the Society of Friends.

2. Where was the place of birth of the patient?
Sheffield, Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Nothing particular in this respect, but every thing of a normal character

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The understanding and affections were of an ordinary character, and her education which was good for the period, was chiefly received at day schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Industrious, temperate, and regular during the whole of her life

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Married at 30 years of age, has three children, eldest 19 years, youngest 15 years old.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
No, not in any way.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
Her pecuniary circumstances are not so good as formerly, and her married life has been a disappointment, more especially for the last few years.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
Not any

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? An uncle was thrown into a nervous state from fright 50 years ago, requiring his removal to the county asylum, her brother's health and nervous stamina were delicate at the age of 23, but have been perfectly well since, and he is now 69 years of age.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
She has had several attacks of nervous depression, but none requiring a removal to an asylum, Her present attack is due partly to an exaggerated fear of poverty,

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

At about 40 years of age.

15. What has been the duration of the present attack?

About four months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

During the last ten years she has had three attacks of nervous depression, from which she recovered in 3 or 4 months.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

The intervals of sanity were complete, and remained so for from one to three or four years.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Her spirits were unusually elevated previous to the last attack of depression, but the sleep and health were moderately good.

19. What were the first decided symptoms of mental aberration?

Melancholy depression.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Fear of poverty; and constant anxiety that all clothes and household goods, are wearing out and cannot be replaced.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No, but sometimes her temper is unduly excited.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Her habits are quite proper.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In good health, but subject to constipated bowels.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Not in any public or private asylum, but has formerly recovered at hydropathic establishments.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Medical means proved unavailing.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder is increasing, but she has lucid intervals which occur at uncertain times.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr William Fisher Orchard Place Sheffield
or to
John Hobson Tapton Elms Sheffield

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

We I, the undersigned, hereby request you to receive Catherine Fisher

whom we last saw at Weston Bank Sheffield on the 12th July by James Wall and on the 20th July by P.E. Fisher and another 21st July by William Fisher and John Hobson

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Catherine Fisher

Signed, Names William Fisher John Hobson P.E. Fisher James Wall
Occupation (if any), Merchant, Manufacturer, Merchant, Gentleman
Place of Abode, all at Sheffield Yorkshire
Degree of Relationship (if any), or other circumstances of connexion with the Patient } William Fisher and P.E. Fisher are brothers in law John Hobson is brother and James Wall cousin The above four persons are trustees of the family property appointed by Charles Fisher, her husband

Dated this twenty first Day of July
One Thousand Eight Hundred and Sixty 1865

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Catherine Fisher
Sex and Age	Woman, 51 years old
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Middle class, mother of family
Religious persuasion, as far as known	Unitarian
Previous Place of Abode	Always lived in Sheffield
Whether First Attack	First attack of importance
Age (if known) on First Attack	Slightly attacked at 40 years of age
When and where previously under Care and Treatment	Matlock Hydropathic Establishment
Duration of existing Attack	Four months
Supposed Cause	Fear of poverty and domestic unhappiness
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	Not any.
Name and Address of Relative to whom Notice of Death to be sent.	John Hobson Tapton Elms Sheffield

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) William Fisher John Hobson P.E. Fisher James Wall
Occupation (if any), see above for particulars
Place of Abode, see above for particulars –
Degree of Relationship (if any), or other circumstances of connexion with the Patient

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Corder Thompson
being a (a) Graduate of the University of Edinburgh
and being in actual practice as a (b) Physician
hereby certify that I, on the twenty second day of July 1865
at (c) Western Bank Sheffield
in the County of York separately from any other Medical Practitioner,
personally examined Mrs Catherine Fisher
of (d) Western Bank Sheffield and that
the said Mrs Catherine Fisher
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
She is utterly dependent - fancies everything is going from that she is in great want & suffers from the greatest uneasiness - cannot be roused - has some other great trouble upon her mind - & believes she is to be arrested for debt
2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her delusions & constitutional habits & mental aberration

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, as the case may be, —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Corder Thompson MD
Place of Abode, Norfolk Road Sheffield
Dated this 22nd day of July One Thousand Eight Hundred and Sixty five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Favell M.R.C.S. & L.S.A.
being a (a) ~~Surgeon & Apothecary~~
and being in actual practice as a (b) general practitioner
hereby certify, that I on the 24th day of July 1865
at (c) Western Bank Sheffield
in the county of York separately from any other Medical Practitioner,
personally examined Catherine Fisher of Western Bank
of (d) Western Bank, Catherine Fisher of Western Bank and that
the said Catherine Fisher of Western Bank
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) pre-depression and absurd reasoning or unreasoning with suicidal thoughts, and violent words and actions
2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, as the case may be, —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, William Favell
Place of Abode, Sheffield
Dated this twenty first day of July One Thousand Eight Hundred and Sixty five

No. 1078. Daniel Richardson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the Order for the Reception shall bear date not more than a month, and the Medical Certificates not more than seven days, previous to the admission of the Patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, as Father, Brother, Son or Partner, the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Daniel Richardson whom I last saw at his own house at Great Leighs Essex on the Twenty third day of Eighth, month (August) (a) 1865 a (b) a person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Daniel Richardson

Signed, *Name,* Henry Marriage

Occupation (if any), Mealman

Place of Abode, Broomfield Nr Chelmsford Essex

Degree of Relationship (if any), or other circumstances of connexion with the Patient No Relationship A Neighbour

Dated this Twenty sixth Day of Eighth month One Thousand Eight Hundred and Sixty Five

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Daniel Richardson
Sex and Age	Male (about 60 years old
Married, Single, or Widowed	Batchelor
Condition of Life, and previous Occupation (if any)	Farmer
Religious Persuasion, as far as known	Society Friends
Previous Place of Abode	Great Leighs Essex
Whether First Attack	Second
Age (if known) on First Attack	about 48 years
When and where previously under Care and Treatment	Retreat York
Duration of existing Attack	One year
Supposed Cause	not known
Whether subject to Epilepsy	No —
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	None
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	was examined by two Medical men
Name and Address of Relative to whom Notice of Death to be sent	No near Relatives To be sent to Francis Hills Fairing Nr Kelvedon Essex or Henry Marriage

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, *Name,* (c) Henry Marriage

Occupation (if any), Mealman

Place of Abode, Broomfield Nr Chelmsford

Degree of Relationship (if any), or other circumstances of connexion with the Patient None

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Arthur Goodchild
being a (a) Member of the Royal College of Surgeons of England & Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify that I, on the 14th day of August 1865
at (c) Great Leighs
in the County of Essex separately from any other Medical Practitioner,
personally examined Daniel Richardson
of (d) Great Leighs – Farmer and that
the said Daniel Richardson
is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is at times much excited; talks at random about some signature of his, which he has affixed to some blank sheet of paper, in London, by which act he has ruined himself & the whole world. Talks about "Copers" being about to carry him off; and obstructs his servants when carrying on his lawful business

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Will not allow his business to be carried on, & is at times very much excited & violent to those about him / his housekeeper and Farming man / Also talks about beheading one Harrison to whom he has taken a dislike (Mr. Morrison)

Signed, Name, Arthur Goodchild
Place of Abode, Lt Waltham Mr Chelmsford Essex

Dated this 14th day of August One Thousand Eight Hundred and Sixty Five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8 10, 11. 12. 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Francis Lovell
being a (a) Member of the Royal College of Surgeons of England, and Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon and Apothecary
hereby certify, that I on the fifteenth day of August 1865
at (c) Great Leighs
in the county of Essex separately from any other Medical Practitioner,
personally examined Daniel Richardson
of (d) Great Leighs – Farmer and that
the said Daniel Richardson
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is under the impression that "he signed his name to a blank sheet of paper, some years ago, and that this has been the ruin of him; that foreigners or "Coupers" as he calls them are after his property, and that they will ruin him, and the whole country and that these foreigners are often passing his House, looking after him

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
He is at times much excited, his nights are often restless, & anxiety people are about the premises –

Signed, Name, Francis Lovell
Place of Abode, Chelmsford

Dated this fifteenth day of August One Thousand Eight Hundred and Sixty five

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period?

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Father was very low in his mind at intervals though never under restraint

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The return of the disorder may be attributed to a fire on his premises, about three years ago, up to which time he was almost free from his delusions

* When answers have been previously furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? about 48 years old

15. What has been the duration of the present attack? Twelve months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? once before lasting 3 or 4 years

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
was complete for several years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
nothing in particular

19. What were the first decided symptoms of mental aberration?
Fear of being ruined by foreigners

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
The man was restless & uneasy, the least thing would excite him, but chiefly he imagined that "copers" or foreigners were following him about, to ruin him. He is under the permanent delusion of having signed a blank sheet of paper in London

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? no

23. What are the habits of the patient as regards personal cleanliness and decorum? Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
He has been subject to attacks of Gout, but not so frequently since his mental disorder ~~has~~ assumed a more active character; and during a recent attack he was much more manageable and mentally sound

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
No Medical means have been adopted for the mental disorder

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing; no lucid intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Francis Hills Feering Mr Kelsedon Essex
Henry Marriage Broomfield Mr Chelmsford Essex
Accounts to be sent to the last name

No 1078. Daniel Richardson

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 26th day of August 1865
at (c) The house of John Clarke Heslington Road York
in the County of York separately from any other Medical Practitioner,
personally examined Daniel Richardson
of (d) Great Leighs Essex Farmer and that
the said Daniel Richardson
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Rambling incoherent conversation – delusions that his property and the whole country is in danger from foreigners.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Samuel William North
Place of Abode, 31 Castlegate York
Dated this twenty sixth day of August One Thousand Eight Hundred and Sixty five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Temple Chevallier Paley
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty sixth day of August 1865
at (c) The house of John Clarke Heslington Road York
in the county of York separately from any other Medical Practitioner,
personally examined Daniel Richardson
of (d) Great Leighs Essex Farmer and that
the said Daniel Richardson
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Incoherent conversation, states that persons he calls "Coupers" are after his property to ruin him & that he has seen a man in his field with a star on his hat whom he calls one of the foreigners

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Temple Paley
Place of Abode, 23 High Petergate York
Dated this twenty sixth day of August One Thousand Eight Hundred and Sixty five.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (*)

a (b) as a Patient into your House.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of

One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any).....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment ....

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

No 1079. Robert Fennell.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Robert Fennell whom I last saw at York on the Tenth day of Tenth Month 1865 (a) a (b) person of Unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Robert Fennell

Signed, *Name,* Joshua Robert Fennell
Occupation (if any), Farmer
Place of Abode, Garryroan, Cahir Co Tipperary
Degree of Relationship (if any), or other circumstances of connexion with the Patient a brother

Dated this Tenth Day of Tenth Month 1865
One Thousand Eight Hundred and Sixty five

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Robert Fennell
Sex and Age	Male nearly forty three
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	in business as bleacher of linen &c
Religious persuasion, as far as known	a Member of the Society of friends
Previous Place of Abode	Banbridge
Whether First Attack	Second attack
Age (if known) on First Attack	Nearly forty two
When and where previously under Care and Treatment	At Doctor Duncans, Farnham, Wm Dublin
Duration of existing Attack	About a month
Supposed Cause	Social enjoyment
Whether subject to Epilepsy	Not that I know of
Whether Suicidal	I think not
Whether Dangerous to others	not unless irritated
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	Joshua Robt Fennell

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Joshua Robt Fennell
Occupation (if any), Farmer
Place of Abode, Garryroan Cahir Co Tipperary
Degree of Relationship (if any), or other circumstances of connexion with the Patient brother

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, James F. Duncan M.D.
being a (a) Fellow of the Roy. & Queen's College of Physicians in Ireland
and being in actual practice as a (b) Physician
hereby certify that I, on the Seventh day of October 1865
at (c) Farnham House, Finglas
in the County of Dublin separately from any other Medical Practitioner,
personally examined Robert Fennell
of (d) Ballybridge - Linen Bleacher, and that
the said Robert Fennell
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Incoherence
Delusions -
Impaired Memory
Excitability
Occasional Mental Torpor

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* James F. Duncan M.D &c
Place of Abode, 8 Sup. Mem in St Dublin

Dated this Seventh day of October One Thousand Eight Hundred and Sixty five

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Valentine Burke M.D
being a (a) Licentiate of the Roy. & Queen's College of Physicians in Ireland -
and being in actual practice as a (b) Physician
hereby certify, that I on the Seventh day of October
at (c) Farnham House, Finglas.
in the county of Dublin separately from any other Medical Practitioner,
personally examined Robert Fennell
of (d) Ballybridge, Linen Bleacher and that
the said Robert Fennell
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherence & Incon-
-sistency - Talkeying Gloom & Crying for bodily
Cleanliness - Forgetfully & requisite use of ordy
Conducter, Thought Memory Memory much -

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I deem of Great Excitability and Incli-
-nation to tear her clothes -

Signed, *Name,* Valentine Burke M.D
Place of Abode, 34 Harcourt St -

Dated this Seventh day of October One Thousand Eight Hundred and Sixty five -

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A Member by Birthright.

2. Where was the place of birth of the patient?

Garryroan, Co. Tipperary, Ireland.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Quiet & passive, rather inclined to drollery, — his powers of mental calculation were large.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Not much — was educated by private Milton and at York Friend's school. —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Served his time in a wholesale cotton warehouse, & afterwards chose Linen Bleaching as a trade he was industrious & temperate, regular, & punctual in his habits.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

At 39 — Has two children, 3 & 1½ years, both living.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Whatever he engaged in, was with earnestness. —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

⊗ I understand he was previous to the attack remarkably successful though several of his speculations subsequently turned out the reverse

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

One or two fainting fits, within the last few years. —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Had violent bleeding of the nose when a boy & afterwards slight Hemorrhage of the lungs, at two different periods, otherwise was pretty healthy.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Not any. —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The first, from over anxiety about business, the second, on attempting it again.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

⊗ This answer & those similarly marked have been given by me

J. F. Duncan

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14. At what age was the patient first attacked with symptoms of insanity?

At 42 years of age.

15. What has been the duration of the present attack?

About a month.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? ⊗ Once previously — commencing in September 1864 & ending in January this year — Acute Mania with some symptoms of incipient General Paralysis.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

⊗ Not absolutely complete — the Pulse always remained higher than natural and weaker — but otherwise he appeared calm & rational.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Great elevation of spirits & irritability, and an inclination to roam about, — Could not sleep, — general health good.

19. What were the first decided symptoms of mental aberration?

Most extravagant ideas & a desire to engage in a large trade.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

⊗ Restlessness — Loss of Sleep at night — Writing innumerable & foolish letters — Setting up a Bank without Capital — Importing Cattle from America & selling them at a profit for one penny a head — Carrying 1st & 2d Class Passengers on Railways for a penny a trip & 3d Class for nothing &c

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

⊗ Not prone but he has broken various articles of furniture when excited, torn his bedclothes & kicked the attendants when they attempted to prevent his leaving his Room or thwarted his wishes.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

⊗ No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

⊗ Generally good — but he has at times been deficient in both apparently from mental torpor

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. ⊗ When first admitted about a month ago his bodily health was not good as indicated by a tendency in some slight scratches which he got previous to admission to degenerate into unhealthy sores and also by unhealthy secretions from the Bowels & Kidneys. It is now much improved.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

⊗ Once before in Farnham House where he is at present. Commencing in September 1864 & ending last January in Convalescence.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

⊗ Vapour Baths — Counter irritation to the Scalp — Sedatives including Morphine, Hyoscyamus, Digitalis & Bromide of Potassium — Slight Mercurial treatment not pushed to Ptyalism.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

⊗ His present attack does not appear to be more severe than the last.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joshua Robt. Fennell
Garryman
Cahir
Co. Tipperary

No 1080.

David Goss Kellaway.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A Member by convincement

2. Where was the place of birth of the patient? At Tanlock

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He was educated at an ordinary school in the town.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. A Tailor. He was always temperate and industrious

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. He married at the age of 21. 4 Children. Two have died ~~about the age of 12~~ and the eldest now living is 14 the youngest is 4 the children by his third wife

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? He had an attack of Inflammation of the Membranes of the Brain about 25 years ago

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? The Mother was mentally deranged for a long time prior to her death.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The remote attacks Cause was an attack of Congestion of the Brain about 6 years ago. The immediate a fall on the 25th Inst which caused an attack of Meningitis.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? At the age of 56

15. What has been the duration of the present attack? Four months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

He has not been quite well since the attack of congestion of the brain 7 years ago.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Although not insane yet his memory has been deficient since the attack 7 years ago.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

He was often very irritable, and would get frequently very low spirited.

19. What were the first decided symptoms of mental aberration? Loss of Memory.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He talks incoherently on all subjects of recent occurrence.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? He talks of self destruction but has never attempted violence on himself

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

His appetite has been good since the recovery from the acute attack. though he occasionally refuses

23. What are the habits of the patient as regards personal cleanliness and decorum? Cleanly.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. His health is good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

He has not been in a Hospital or Asylum

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? For the recent acute attack he was leached. blistered and freely purged

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

He never appears to be free from delusions.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

To Louisa Kellaway, Tavistock

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive David Goss Kellaway

whom I last saw at Brook St Tavistock Devon

on the 28 day of November 1865 (a)

a (b) Person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said David Goss Kellaway

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, *Name,* Louisa Kellaway

Occupation (if any), Mercer & Draper

Place of Abode, Brook St Tavistock Devon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this 28 Day of November

One Thousand Eight Hundred and Sixty five

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	David Goss Kellaway
Sex and Age	62
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Tailor
Religious persuasion, as far as known	A member of the society of Friends
Previous Place of Abode	Tavistock
Whether First Attack	About 7 years ago
Age (if known) on First Attack	56
When and where previously under Care and Treatment	At Tavistock about 7 years since.
Duration of existing Attack	Four months
Supposed Cause	Fall
Whether subject to Epilepsy	No
Whether Suicidal	~~No~~ Rather so.
Whether Dangerous to others	~~but~~ dangerous ~~but~~ and suffers blows occasionally.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	To myself

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Louisa Kellaway

Occupation (if any), Mercer & Draper

Place of Abode, Brook St Tavistock Devon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife To David Goss Kellaway

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, William Cornish Northey being a (a) Surgeon and Apothecary. Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the 27th day of November at (c) Tavistock (no Brook St) in the County of Devon separately from any other Medical Practitioner, personally examined Mr David Jos Pellowny of (d) Tavistock Grocer & Tailor and that the said Mr David Jos Pellowny Tailor is a (e) Person of Unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself, (f) the Circumstance is that he imagines that he is the Governor of the Convict Prison at Dartmoor and that he is placed there for the purpose of shooting the prisoners.

2. Other facts (if any) indicating Insanity communicated to me by others (g) he frequently talks to Person who have been dead for many years, and also does not recognise his own children when they are there, and frequently gives them blows.

House not Numbered

Wife informant

Signed, Name, Wm. Northey

Place of Abode, Tavistock

Dated this 27th day of November One Thousand Eight Hundred and Sixty 5

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, John Symons Bond being a (a) Fellow of the Edinburgh College of Physicians and being in actual practice as a (b) Physician hereby certify, that I on the 28th day of December 1865 at (c) 2 Brook St in the county of Devon separately from any other Medical Practitioner, personally examined Mr David Jos Pellowny Tailor Brook St and that the said David Jos Pellowny is a (e) Person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) The Other Facts I observed to London (about 6 Jan last) viz on the 1st and the night also at Mr Rice's Mr Symons & I came with him as far as Exeter & I left him under the Care of Dr Symons.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Receiving Letters of very excited nature, stating himself Governor of Prison &c &c

Street & number

Street & number

Signed, Name, John Symons Bond

Place of Abode, 2 Brook St Devon

Dated this Twenty eighth day of December One Thousand Eight Hundred and Sixty five

No: 1081. Mary Atkinson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Mary Atkinson whom I last saw at Lawrence House on this Eleventh day of December (a) a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Mary Atkinson

Signed, Name, William King
Occupation (if any), Agent
Place of Abode, Mickley Mills & Ripon
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Executor under the Will of her late Husband

Dated this Eleventh Day of December One Thousand Eight Hundred and Sixty five.

To John Fitching Esqr. M.D.
Superintendent of The Retreat (c) York.

(c) Proprietor or superintendent of.
(d) Describing the house or hospital by situation and name, if any.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Atkinson
Sex and Age	Female Fifty years of age
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Farmer's Wife
Religious Persuasion, as far as known	Roman Catholic
Previous Place of Abode	Low Park. Hayelwood
Whether First Attack	First Attack
Age (if known) on First Attack	Fifty years
When and where previously under Care and Treatment	Lawrence House
Duration of existing Attack	About six weeks
Supposed Cause	Loss of Husband
Whether subject to Epilepsy	Not
Whether Suicidal	Not
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Thomas Winterburn. Skipton Road High Harrogate.

(e) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (e) William King
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstances of connexion with the Patient }

200

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

(a) House *or* hospital.

was admitted into this (a) as a Private Patient, on the

Day of 186 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

received (b).

Signed,

(c) Superintendent *or* proprietor of ———.

(c)

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Procter being a (*a*) Member of the College of Surgeons and being in actual practice as a (*b*) Surgeon hereby certify, that I, on the 12th day of December at (*c*) Lawrence House Lawrence St York in the County of York separately from any other Medical Practitioner, personally examined Mary Atkinson of (*d*) Low Park Hazelwood and that the said Mary Atkinson is a (*e*) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (*f*) She is depressed. does not answer questions readily & thinks that she has set fire to several places

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*g*)

Signed, *Name,* William Procter

Place of Abode, 44 Petergate York

Dated this 12 Dec day of One Thousand Eight Hundred and Sixty five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North being a (*a*) Member of the Royal College of Surgeons London and being in actual practice as a (*b*) Surgeon hereby certify, that I on the 12th day of December 1865 at (*c*) Lawrence House Lawrence St York in the County of York separately from any other Medical Practitioner, personally examined Mary Atkinson of (*d*) Low park Hazelwood. Widow and that the said Mary Atkinson is a (*e*) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (*f*)
Restlessness, depression of spirits, a belief that her children & the world at large have suffered serious injury through faults of hers.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*g*)

Signed, *Name,* Samuel William North

Place of Abode, 31 Castlegate York

Dated this 12 day of December One Thousand Eight Hundred and Sixty five

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No 1082

Marian Ross.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Not a Member

2. Where was the place of birth of the patient?

Allendale Town Northumberland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Delicate in Childhood

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Quick & Intelligent of Average intellectual Capacity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at the Village School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Domestic occupations. Regular temperate & industrious Habit

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 22 years of age. Seven Children. Eldest 40 & Youngest 25

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Has been very healthy since Childhood

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Yes two Sisters of the patient have been insane.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Husband died in 1862 and that is supposed to have been the Cause

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

71 Years

15. What has been the duration of the present attack?

Almost 12 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

She had a very severe attack of low Bilious Fever in the early part of the past summer, from which she very slowly recovered – She slept badly – was very despondent & appetite poor, until the insanity became fully developed.

19. What were the first decided symptoms of mental aberration?

Imagining Transactions were watched, that people tried to injure her in many ways & annoy her and wrote articles in the Newspapers about her &c

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Dread of Poverty – delusions also respecting anonymous attacks – debts & penalties she has rendered herself liable for – delusion respecting her being accused of robbing her children of money –

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Yes — Has threatened to say she would do something to herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Scrupulously clean and decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

At present her bodily Health is good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No –

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

The General Health has been attended to and she has been closely watched, but her symptoms have become decidedly worse within the last month –

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder is evidently increasing in intensity – steadily so – and my belief is she will make an attempt on her own life, if the opportunity occurs –

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

William A Rae 15 Albion Place Newcastle

No 1082.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Marian Ross whom I last saw at 15 albion Place on the 15 day of December 1865 (*) a (†) Person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Marian Ross

Signed, *Name,* Wm A Ross
Occupation (if any), Grocer
Place of Abode, 15 Albion Place
Degree of Relationship (if any), or other circumstances of connexion with the Patient Son

Dated this fifteenth Day of December One Thousand Eight Hundred and Sixty five

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Marian Ross
Sex and Age	42
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Always attended Friends Meeting
Previous Place of Abode	Resided in Newcastle nearly 60 years
Whether First Attack	First attack
Age (if known) on First Attack	41
When and where previously under Care and Treatment	
Duration of existing Attack	4 Months
Supposed Cause	Death of her husband
Whether subject to Epilepsy	No
Whether Suicidal	Doubtful
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Wm A Ross 15 albion Place Newcastle

(*) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Margaret Ross
Occupation (if any),
Place of Abode, 15 Albion Place Newcastle
Degree of Relationship (if any), or other circumstances of connexion with the Patient Daughter

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, as, e.g., "Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, William Robinson being a (a) Doctor of Medicine Physician Universities of Durham and being in actual practice as a (b) Licentiate of the Apothecaries Company & Member of the College of Surgeons London General Practitioner hereby certify that I, on the twelfth day of December 1865 at (c) 15 Albions place Newcastle on Tyne in the County of Northumberland personally examined separately from any other Medical Practitioner, Marian Ross of (d) 15 Albions place Newcastle on Tyne and that the said Marian Ross is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

Hallucinations — is afraid to go out because she imagines people in all things about her. Her children — Says they accuse her of making away with her being addicted to drink — imagines every newspaper contains accusations attacks against Thinks she is so poor as to be ready able to afford the common necessaries of life — to

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Has become very Excitable & variable in her temper of late, and has been heard to say, she is afraid she will be doing something desperate some day — would deny herself even necessary food & left Husband for

Signed, Name, William Robinson

Place of Abode, 35 West St Gateshead

Dated this twelfth day of December One Thousand Eight Hundred and Sixty five

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, as, e.g., "Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, Henry Brady being a (a) Licentiate of the Apothecaries Company and being in actual practice as a (b) General practitioner hereby certify, that I on the thirteenth day of 12th mo: (December) 1865 at (c) 15 Albion place, Newcastle on Tyne in the county of Northumberland separately from any other Medical Practitioner, personally examined Marian Ross of (d) 15 Albion place, Newcastle on Tyne and that the said Marian Ross is a (e) person of unsound mind, and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

Fancies that her family examine & depredate them of their pecuniary rights — that a lawsuit is pending by Consequence — that Solicitors are in Collusion on constantly on the watch to take her away — surrounded by Relations Men and Females, who are trying to alarm her — does not go out as many lady as planning at, and plotting her — that the Public Press are constantly putting about her and to injure her character — that she is accused of robbing Church — that her Brother has defrauded the Revenue, and is likely to be arrested —

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(Daughter) — Has occasionally hinted that she will some day be doing herself mischief — Hesitates to take proper nourishment from a belief that she cannot afford to procure it — temper irritable — occasionally somewhat violent —

Signed, Name, Henry Brady

Place of Abode, Gateshead

Dated this thirteenth day of 12th mo (December) One Thousand Eight Hundred and Sixty five

No 1083.

Enfield Harrison.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? In membership by birthright

2. Where was the place of birth of the patient? Manchester

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing peculiar

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? His disposition is naturally mild and [illegible] docile: he is shy and diffident — not precocious, nor professed of any remarkable mental power

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He was brought up by his parents with six other children, and from the age of 12 to 15 was at Ackworth School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. He was apprenticed to a country draper — his habits have been temperate X

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. He is aged about 24 — and has not been married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? He has rather a strong bias towards Mechanics

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? He has been a good deal disappointed by not obtaining employment according to his mechanical taste —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Never so afflicted

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Merely the usual complaints of childhood

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? We believe there is no such hereditary predisposition — an Aunt of the patient (on father's side) was an inmate of York Retreat

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The causes of all the attacks appears to be nervous debility we know of no peculiar mental cause, beyond the disappointment stated above. The writer has been informed by the patient during a lucid interval since the attack, that for fourteen years he has been in the habit of self pollution — for which he is now exceedingly penitent — and remorse for this vice has preyed upon his spirits (communicated to J. Harrison brother of patient but unknown to other members of the family.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

The attack commenced about a week ago — age 24 to 25

15. What has been the duration of the present attack?

It It has been intermittent during this time

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

see above

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Previous to the attack there appeared a slight elevation of spirits (during 2 weeks) but no change in temper &c. his sleep not very sound

19. What were the first decided symptoms of mental aberration?

An apprehension of immediate death — followed by an idea that he was being poisoned

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He has been subject to various delusions — amongst others that he is already dead — he also fails to recognise his nearest relatives — at times

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

He has shown no violence, beyond determined attempts to escape.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Occasionally he refuses food — never attempts to injure himself or others

23. What are the habits of the patient as regards personal cleanliness and decorum?

He is cleanly in habit, and decorous in conduct

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

His bodily health is not good, he has frequent involuntary seminal discharges, [illegible] in urine, and digestive power weak

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

He has never been in any asylum

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

He has been under the care of two medical men

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder is spasmodic, and appears on the increase, he has lucid intervals, which occur at irregular periods

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas Harrison

Binyons Robinson & Co. } 18 St Anns Square

Manchester

I visited Crossfield Harrison at his mothers House at Sale in Cheshire he appeared much depressed in spirits, taciturn, with dilated pupil & feeble pulse debility & cold feet.

After conversation some time reasonably, he astonished me by saying he was dead he had not wished to live he had no business with life, this appeared to me to be aberration of intellect with in similar cases a tendency for the patient to injure his person I therefore deem him to be insane of mind. & a suitable patient for a lunatic asylum

In conversation with his mother sister & brother I have been informed by them that he has said he was dead. that he was now in Heaven & not on Earth. that he had been in Hell & some of these remarks he used repeatedly.

There is no fever nor febrile delerium in his case

I visited him on the 10th inst January 1866

Wm White ch.D.

Manchester
12/1/66

No 1083.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Crosfield Harrison whom I last saw at Sale near Manchester on the present 15th day of 1st Month 1866 (*) a (†) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Crosfield Harrison

Signed, *Name,* Hannah Harrison
Occupation (if any), Northen Knew
Place of Abode, Sale near Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this fifteenth Day of 1st Month One Thousand Eight Hundred and Sixty-six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Crosfield Harrison
Sex and Age	Male — age 24 to 25
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Assistant to general draper
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Nantwich — Cheshire
Whether First Attack	Yes
Age (if known) on First Attack	—
When and where previously under Care and Treatment	—
Duration of existing Attack	about one week
Supposed Cause	— despondency
Whether subject to Epilepsy	— No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	Hannah Harrison, Northen Knew Sale near Manchester

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Hannah Harrison
Occupation (if any), —
Place of Abode, Sale near Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Herbert Smith Renshaw
being a (a) Doctor of Medicine and Licentiate of the Royal College of Physicians of London
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the fourteenth day of January 1866
at (c) ~~Sale~~ Northern View Wardle Lane Sale
in the County of Chester separately from any other Medical Practitioner,
personally examined Crosfield Harrison
of (d) Northern View Wardle Lane Sale and that
the said Crosfield Harrison - draper's assistant
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Unreasonable remarks, great depression of spirit, untrue statements. He asserts that he is in Heaven, and will not recover from his illness.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) violent restlessness

Signed, *Name,* Herbert Smith Renshaw
Place of Abode, Sale Bridge House, Sale, Cheshire
Dated this 15th day of January One Thousand Eight Hundred and Sixty 6 - Sixty Six.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William White
being a (a) Physician & M.D. Edinr
and being in actual practice as a (b) Physician
hereby certify, that I on the 10th day of 1mo Jany 1866
at (c) ~~Sale~~ Northern View Wardle Lane Sale
in the county of Chester separately from any other Medical Practitioner,
personally examined Crosfield Harrison
of (d) ~~Sale~~ Northern View Wardle Lane Sale and that
the said Crosfield Harrison
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Telling me he was dead & had been dead

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Running away from home. saying he was dead. that he had been in heaven - communicated by his mother and brother Thomas

Signed, *Name,* William White M.D.
Place of Abode, Manchester
Dated this 15th day of 1st Mo One Thousand Eight Hundred and Sixty Six

No 1084.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 31st day of March 1866, of Florence Dorothy Smith - a Private Patient in Witham ~~House~~ Asylum - Essex - to the Retreat ~~House~~, York -

Given under our hands this 1st day of March in the year of Our Lord One Thousand Eight Hundred and Sixty Six.

[signature]
R W S Lutwidge
} Commissioners in Lunacy.

ORDER.

I,* Lister Smith the undersigned having Authority to discharge Florence Dorothy Smith a Private Patient in Witham ~~House~~ Asylum - Essex - hereby order and direct that the said Florence Dorothy Smith be removed therefrom to the Retreat ~~House~~ York -

Given under my hand this* 3rd day of March in the year of Our Lord One Thousand Eight Hundred and Sixty Six.

(Signed) Lister Smith

Place of Abode Bocking Essex

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(00) 5|64—H & S 4559

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No 1084.

Florence D. Smith.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A member by birthright.

2. Where was the place of birth of the patient?

At Bocking in the County of Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing particular during infancy or childhood. Her bowels, but during the last 4 years a frequent inclination to evacuate, without material results

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

General disposition a quiet & keen observation and quick perception of things considerable strength of mind and a large share of natural understanding

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Both the understanding and affections were sedulously and carefully cultivated in early life and instruction imparted at home in the common departments of education; and during the past 3 years at public schools.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Light domestic occupations, industrious pursuits and total abstinence.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the ages which the eldest and youngest would have attained, supposing them to have survived.

—

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

An earnest application at Schools in the pursuit of the various branches of learning she engaged in.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? None except that alluded to in the third answer

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? A paternal uncle died at the Retreat at the age of 40 from insanity brought on by epileptic fits caused by fright in childhood. No hereditary predisposition.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Close application to study, and a distressing fear of fever that was in the School during the last quarter. Her peculiar age also may have some influence as indicating a material change in constitution.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? At fifteen years.

15. What has been the duration of the present attack? About ten weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

It is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Complete sanity at intervals of ~~from~~ 20 to 30 days.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Reserved rather than depressed - affectionate and docile - but so firm in conscientious adherence to truth that it may and probably has been mistaken for obstinacy - through her curt & gruff answers.

19. What were the first decided symptoms of mental aberration?

A firm persuasion of her having taken fever excited her so that she could not rest, this eventuated in fits of laughter, singing & which was considered to presage brain fever.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Pains in the head are the prelude to an attack also restless nights succeeded by considerable violence of action which has lasted about a week when the return to sanity is as sudden as the attack. She has no particular delusion on any subject.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? The first attack was attended with much violent exertion and a strong propensity to mischief and to choke herself by thrusting things into her mouth; since then the attacks have been of a much milder character and a longer period of lucidity between them.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Only as remarked in Answer to Quest.n No 21.
In the last attack but one she had a great propensity to bite and tear ~~her~~ things to pieces but was better last time.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Neat and clean when sane.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

We do not consider her in good bodily health and the weakness alluded to in answer No 3 we consider arises from it.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has been in a private asylum for 2 months during which time the malady appears much mitigated

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

She was placed under the treatment of the medical attendant of the family at first and since that under that of the Asylum.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears decreasing and she seems very cheerful & happy during her lucid intervals; the attacks have taken place about every third or fourth week.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Sister Smith Brook Cottage - Bocking Essex.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (a)

a (b) as a Patient into your House.

Subjoined is a Statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of

One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Florence Dorothy Smith
Sex and Age	Female 15 years of age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Pupil at School
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Bocking in the County of Essex
Whether First Attack	First Attack
Age (if known) on First Attack	
When and where previously under Care and Treatment	At Croydon School - to 12 mo 18th 1863
Duration of existing Attack	About 10 weeks
Supposed Cause	Over study and fear of fever.
Whether subject to Epilepsy	Not subject to fits of any kind
Whether Suicidal	The last attacks have not indicated
Whether Dangerous to others	or suicidal disposition; but at first this was doubtful
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	At the height of the paroxysms she has sometimes bitten her attendants and thrown things at them
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Lister Smith. Brook Cottage Bocking-Essex

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or an idiot, or* a person of unsound mind.

I, the undersigned, George Cook Holmested being a (a) Member of the Royal College of Surgeons in London and a Licentiate of the Apothecaries' Company and being in actual practice as a (b) Surgeon and Apothecary hereby certify that I, on the twenty second day of February 1866 at (c) Mr Tomkins Lunatic Asylum Maldon Road Witham in the County of Essex separately from any other Medical Practitioner, personally examined Florence Dorothy Smith of (d) Bocking - but now a patient in the Witham Asylum and that the said Florence Dorothy Smith is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) her general appearance and manner and her own acknowledgement that she is not quite correct in her mind, and that she has not ~~[illegible]~~ entirely recovered her usual health both of body and mind. I also attended her professionally & certified as to her Insanity before she came here.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Miss Eliza Freeman her usual Attendant told me that she has had several attacks of Insanity similar to what she was suffering from when she came here in December last. — In the intervals she is pretty well but always rather strange in her manner.

Signed, Name, G. C. Holmested

Place of Abode, Bocking Essex

Dated this twenty second day of February One Thousand Eight Hundred and Sixty six.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or an idiot, or* a person of unsound mind.

I, the undersigned, Alexander George Proctor being a (a) Member of the Royal College of Surgeons of England &c and being in actual practice as a (b) Surgeon & Apothecary hereby certify, that I on the twenty second day of February 1866 at (c) Mr. Tomkins asylum, situate in Maldon Road, Witham in the county of Essex separately from any other Medical Practitioner, personally examined Florence Dorothy Smith of (d) Bocking, but now a patient in the asylum aforesaid and that the said Florence Dorothy Smith is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f). Her manner and appearance as well as her own admission that she is not capable of controlling her conduct. Expresses a hope of deriving benefit to her mental malady at the York Retreat.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) (by the matron at Mr. Tomkins asylum.) that periodically she manifests an undue terror & alarm, tears up her clothes, and hangs them in shreds about the room. occasionally throws anything in her way, at those who are setting near her.

Signed, Name, A. G. Proctor

Place of Abode, Witham

Dated this 22nd day of Febr One Thousand Eight Hundred and Sixty six —

No 1085.

Thos Jeffrey

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Has always been in Membership in the Soc. of Friends

2. Where was the place of birth of the patient? Ashford, Kent.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Always quick at figures & mental Calculation

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Not more than ordinary & was Educated at Croydon School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Not apprenticed to any particular trade, - Always industrious, temperate & of regular conduct particularly as age advanced.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at the age of 28 - has One Child about 2½ years of age

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Yes, Not In early life at Mechanism - of late years at Chess. - Conduct unbiassed in any particular direction

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Yes Pecuniary Circumstances reduced. - Exposed to many business disappointments

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Yes a bad Asthma

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Mother & Sister somewhat similarly affected.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Business anxieties entirely

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 33 years

15. What has been the duration of the present attack? about three weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? First attack only

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? None

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Some little depression

19. What were the first decided symptoms of mental aberration? depression of spirits

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No

23. What are the habits of the patient as regards personal cleanliness and decorum? Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Fair health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? Homœopathic

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Increasing

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Henry Ashton
Grocer
Scarboro'

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Thomas Jeffrey whom I last saw at Leeds, at 62 Springfield Place on the 12th day of 3 Month 1866 (*)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (*) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Thomas Jeffrey

Signed, *Name,* William Richman Jeffrey
Occupation (if any), Watchmaker
Place of Abode, Saffron Walden
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 12th Day of 3 Month

One Thousand Eight Hundred and Sixty 6

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Thomas Jeffrey
Sex and Age	32 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Provision Merchant
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Leeds.
Whether First Attack	First
Age (if known) on First Attack	Abt 33.
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Abt 3 weeks.
Supposed Cause	Business Anxieties
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	No
Name and Address of Relative to whom Notice of Death to be sent.	Louisa Maria Jeffrey 62 Springfield Place Leeds.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) John H Ashford
Occupation (if any), Grocer
Place of Abode, Scarbo
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, S. Henry Raundsbotham
being a (a) Doctor of Medicine of the University of Edinburgh
and being in actual practice as a (b) Physician
hereby certify that I, on the twelfth day of March, 1866
at (c) 62 Springfield Place, Leeds
in the County of York separately from any other Medical Practitioner,
personally examined Thomas Jeffrey
of (d) that place and that
the said Thomas Jeffrey Provision Merchant 62 Springfield Place Leeds
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Considers himself to be possessed by the devil — to have committed some unpardonable sin — Has incoherent flow of ideas — gives absurd applications to passages of Scripture.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Imagines his partner is beseiged to have run away "over the seas" — that he is watched by enemies from the opposite house with whom I am in league — from his wife & brother

Signed, S. Henry Raundsbotham
Name,
Place of Abode, 16 Park Square Leeds

Dated this twelfth day of March One Thousand Eight Hundred and Sixty six.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Clare
being a (a) Member of the Royal College of Surgeons, London, and a Licentiate of the College of Physicians, Edinburgh
and being in actual practice as a (b) Physician Surgeon
hereby certify, that I on the twelfth day of March, 1866
at (c) 62 Springfield Place Leeds,
in the county of York separately from any other Medical Practitioner,
personally examined Thomas Jeffrey
of (d) that Place and that
the said Thomas Jeffrey, Provision Merchant, 62 Springfield Place, Leeds.
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Highly irrational application & passages of Scripture to his own state by the supposition that he would be relieved from constipation by a Surgeon passing through the anus.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
He informed me that he was imagined surrounded by persons by the devil, that his partner Thomas was over the seas in Russia, he is not that he is watched by enemies in the opposite house with whom Dr Raundsbotham is in league, he has committed some unpardonable sin, & that I communicate very incoherent & unconnected, he is very deficient in moral & information, these things by his wife & brother

Signed, William Clare
Name,
Place of Abode, 28. Park Square, Leeds.

Dated this twelfth day of March One Thousand Eight Hundred and Sixty six.

No 1086.

Mary E. Trotter.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Emmeline Trotter whom I last saw at Lumby Bank, Holmfirth on the 30th day of April (*) a (†) Lunatic as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Mary Emmeline Trotter

Signed, *Name,* Charles J. Trotter
Occupation (if any), Surgeon.
Place of Abode, Holmfirth
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this 30th Day of April
One Thousand Eight Hundred and Sixty Six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Emmeline Trotter.
Sex and Age	Female aged 25.
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Wife of a Surgeon.
Religious persuasion, as far as known	Member of the Church of England.
Previous Place of Abode	Holmfirth, near Huddersfield.
Whether First Attack	Yes.
Age (if known) on First Attack	25
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Three weeks.
Supposed Cause	Accouchement
Whether subject to Epilepsy	No
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Charles J. Trotter, Surgeon, Holmfirth.

(a) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Charles J. Trotter
Occupation (if any), Surgeon
Place of Abode, Holmfirth
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, William James Clarke being a (a) Member of the Royal College of Surgeons and a Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon and Apothecary hereby certify that I, on the thirtieth day of April 1866 at (c) Sunny Bank Holmforth in the County of York separately from any other Medical Practitioner, personally examined Mary Emmeline Trotter of (d) Sunny Bank Holmforth, Wife of Charles J Trotter Surgeon and that the said Mary Emmeline Trotter is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

Incessant and irrational talkativeness which is occasionally very boisterous

2. Other facts (if any) indicating Insanity communicated to me by others (g) Stated by Edward Trotter her Father in Law & Mrs Ellen Honeychurch her Sister. An almost constant Smiles state to that I have witnessed myself.

Signed, Name, Wm J. Clarke

Place of Abode, 66 John William Street Huddersfield

Dated this 30th day of April One Thousand Eight Hundred and Sixty Six —

Name of Informant

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, George Edward Edis being a (a) MRCS Eng & LSA and being in actual practice as a (b) General Practitioner hereby certify, that I on the 30th day of April at Sunny Bank Holmforth in the county of York separately from any other Medical Practitioner, personally examined ~~Mary Emmeline Trotter~~ of (d) Sunny Bank Holmforth ~~Wife of Charles J Trotter~~ Mary Emeline Trotter and that the said ~~Mary Emmeline Trotter~~ Mary Emeline Trotter is a (e) ~~Lunatic~~ and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

Lunatic —

1. Facts indicating Insanity observed by myself (f)

~~From the~~ Incessant talking & want of sleep during my visit ~~& Repeated~~ & about the room & ~~Violent Gesture~~ could not be ~~Engaged~~ in Rational Conversation

2. Other facts (if any) indicating Insanity communicated to me by others (g)

The same as above from the Friends of the Lady.

Too vague some fact must be specified — What the patient did or said to the best of the Informants knowledge —

Dr Horsfall Brother of the Lady.

Signed, Name, George Edis

Place of Abode, Holmforth

Dated this 30th day of April One Thousand Eight Hundred and Sixty Six —

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is she (or she) in any way connected with the Society of Friends?

No, She is a member of the Church of England.

2. Where was the place of birth of the patient?

Dublin.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

She was impulsive, vivacious & wilful - had no remarkable eccentricity - was endowed with more than average natural understanding & was not decidedly precocious.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

She was educated at a ladies' boarding school and received the usual education & accomplishments

6. To what occupation was the patient brought up; and what were her (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Brought up to no occupation. Her habits were industrious, temperate & regular.

7. If the patient be married, state at what age her (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married at the age of 24; and has one child aged 5 weeks.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has her conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Was confined of her first child five weeks ago.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Was subject to occasional hysterical attacks.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The remote cause is supposed to be the naturally tormentual hysterical temperament of the patient, and the immediate cause her accouchement.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

She is now taken more than 25.

15. What has been the duration of the present attack?

Three weeks and a few days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

No previous attack

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Previous to the decided appearance of insanity her spirits were unusually elevated, her temper was uncertain and she did not sleep so well as usual. These circumstances were noticed a day or two before the attack

19. What were the first decided symptoms of mental aberration?

Great excitement, restlessness and incessant talkativeness. Moreover she became indifferent about the child

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The disorder has been manifested as stated in answer to preceeding question. She has no particular or permanent delusion but loves indifferently about various subjects

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

She has torn some of her clothes but is not particularly violent. Has made no dangerous attacks upon anyone.

22. Has the patient shown any disposition to refuse food, or to injure herself, and if so, in what way?

Occasionally refuses food - but shows no disposition to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

She has wet the bed on several occasions but does not do so generally.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is weakly from her recent accouchement and subsequent loss of sleep - otherwise her health is tolerably good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Has never been in an Asylum.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

In the beginning of the malady she was treated by Opiates, latterly she has been simply well nursed

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be stationary; there are no decided lucid intervals nor any great remissions more than the exhaustion of the patient would account for.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Charles J. Trotter,
Surgeon,
Holmforth.

No. 1086. M. E. Trotter

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

THE RETREAT, NEAR YORK.

I hereby give you Notice, That

.

was admitted into this (a) as a Private Patient, on the

Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(a) House or hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

_____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive *Mary Emmeline Trotter*

whom I last saw at *Sunny Bank, Holmfirth*

on the *30th* day of *April* 186*6* (a)

a (b) *Puerperal Maniac* as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said *Mary Emmeline Trotter*

Signed, *Name, Charles J Trotter*

Occupation (if any), Surgeon

Place of Abode, Holmfirth

Degree of Relationship (if any), or other circumstances of connexion with the Patient } *Husband*

Dated this *30th* Day of *April*

One Thousand Eight Hundred and Sixty *Five*

To John Kitching M.D.

THE RETREAT, NEAR YORK.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	*Mary Emmeline Trotter*
Sex and Age	*Female aged 25*
Married, Single, or Widowed	*Married*
Condition of Life, and previous Occupation (if any)	*Wife of a Surgeon*
Religious Persuasion, as far as known	*Member of Church of England*
Previous Place of Abode	*Holmfirth, near Huddersfield*
Whether First Attack	*Yes*
Age (if known) on First Attack	*25*
When and where previously under Care and Treatment	*Nowhere*
Duration of existing Attack	*Three Weeks*
Supposed Cause	*Accouchement*
Whether subject to Epilepsy	*No*
Whether Suicidal	*No*
Whether Dangerous to others	*No*
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	*No*
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	*Charles J Trotter, Surgeon Holmfirth*

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (c) *Charles J Trotter*

Occupation (if any), Surgeon

Place of Abode, Holmfirth

Degree of Relationship (if any), or other circumstances of connexion with the Patient } *Husband*

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William James Clarke being a (a) Member of the Royal College of Surgeons and a Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon and Apothecary. hereby certify, that I, on the thirtieth day of April 1866 at (c) Sunny Bank Holmfirth in the County of York separately from any other Medical Practitioner, personally examined Mary Emmeline Trotter of (d) Sunny Bank Holmfirth, wife of Charles J. Trotter Surgeon and that the said Mary Emmeline Trotter is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Incessant and irrational talkativeness which is occasionally very boisterous

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

An almost constantly similar state to that I have witnessed myself

Signed, *Name,* Wm J Clarke

Place of Abode, 66 John William Street Huddersfield

Dated this 30th day of April One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Newel Ediss being a (a) M. R. C. S. Eng.d & L. S. A. and being in actual practice as a (b) a General Practitioner hereby certify, that I on the 30th day of April 1866 at (c) Sunny Bank Holmfirth in the County of York separately from any other Medical Practitioner, personally examined Mary Emmeline Trotter of (d) Sunny Bank Holmfirth, wife of Charles J Trotter Surgeon and that the said Mary Emmeline Trotter is a (e) Puerperal Maniac and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

From the Incessant talking want of sleep and demeanour

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

The same as above from the friends of the Lady

Signed, *Name,* George N Ediss

Place of Abode, Holmfirth

Dated this 30th day of April One Thousand Eight Hundred and Sixty six

Rebecca Bridgman

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A member by commencement — Her mother originally a member

2. Where was the place of birth of the patient?

Mildenhall Suffolk

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

This lame, which she attributes to a fright when a child — no other peculiarity known

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing known

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Her education was received at a day School at Mildenhall — nothing known as to the understanding & affections

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

In her early life she was shopwoman & latterly for 20 years in the Station of Housekeeper — habits industrious & very regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Not noticed as such

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No pecuniary causes known — but an uncalled for fear of losing her present residence preys upon her mind —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

She had the measles when about 20 — & has been long lame as stated before —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

This is the first attack — Caused by the fear of removal & want as stated in answer to Query 9 —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

She is supposed to be about 67 years old—

15. What has been the duration of the present attack?

Five or six weeks since she first evinced symptoms of insanity—

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first attack—

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

—

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing—

19. What were the first decided symptoms of mental aberration?

Packing up her things for removal several times under the impression that she & they would be turned out into the street—

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Answered by the previous Question which is the prevailing Delusion & indeed the only one—

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She has shown no violence towards anyone & has once jumped out of the bedroom window—

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She shews at times great disinclination for food of any kind which is given to her with great difficulty— No disposition to injure Herself—

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very good—

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never been under care—

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Had only one bottle of medicine

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

She can hardly be said to have any lucid intervals — the disorder appears stationary—

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Ratcliff & Barking Monthly Meeting—

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Rebecca Bridgeman whom I last saw at No. 59 Chapel St Stratford E. on the 12th day of Fifth Month 1866 (*) a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Rebecca Bridgeman

Signed, *Name,* Susannah Cunningham
Occupation (if any), Married Woman
Place of Abode, 59 Chapel St. Stratford
Degree of Relationship (if any), or other circumstances of connexion with the Patient Own Sister

Dated this Fourteenth Day of Fifth Month
One Thousand Eight Hundred and Sixty Six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Rebecca Bridgeman
Sex and Age	Female — About 67 —
Married, Single, or Widowed	Single —
Condition of Life, and previous Occupation (if any)	Housekeeper —
Religious persuasion, as far as known	Society of Friends —
Previous Place of Abode	Stratford 6 years —
Whether First Attack	Yes —
Age (if known) on First Attack	67 —
When and where previously under Care and Treatment	
Duration of existing Attack	Five weeks —
Supposed Cause	Fear of want —
Whether subject to Epilepsy	No —
Whether Suicidal	Yes
Whether Dangerous to others	No —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No —
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent.	Susannah Cunningham 59 Chapel St Stratford E.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Susannah Cunningham
Occupation (if any), Married Woman
Place of Abode, Stratford E.
Degree of Relationship (if any), or other circumstances of connexion with the Patient Own Sister

No 1087

Rebecca Bridgeman

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas James Vallance being a (a) Doctor of Medicine & Fellow of the Royal College of Surgeons of England (by Exam) and being in actual practice as a (b) Surgeon hereby certify that I, on the 12th & 14th day of May 1866 at (c) 59 Chapel Street. Stratford in the County of Essex separately from any other Medical Practitioner, personally examined Rebecca Bridgeman of (d) 59 Chapel Street Stratford Essex and that the said Rebecca Bridgeman is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Extreme melancholic expression, very taciturn, can hardly be got to answer a question, frequent sighing & low moaning saying she does not know "what will be done", "it is a shocking thing" &c say "they are always giving her too much food" — &c

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Sister States that last Friday the 11th she threw herself out of the first floor window injuring herself severely; Susannah Cunningham that her habits are entirely changed; at times refuses food.

Signed, Name, Thomas James Vallance
Place of Abode, Stratford Grove Essex

Dated this Fourteenth day of May One Thousand Eight Hundred and Sixty Six.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Blydesteyn Kennedy being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I on the 11th & 12 day of May, 1866 at (c) 59 Chapel Street Stratford in the county of Essex separately from any other Medical Practitioner, personally examined Rebecca Bridgeman of 59 Chapel Street Stratford of (d) Rebecca Bridgeman and that the said Rebecca Bridgeman is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Extreme despondency very incoherent, muttering when asked a question, thinks it is not proper she should live

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Sister States last Friday the 11th she made an attempt on her life by throwing herself from the first-floor window of the house in which she resides Susannah Cunningham

Signed, Name, J. B. Kennedy
Place of Abode, Broadway Stratford Essex

Dated this Fourteenth day of May One Thousand Eight Hundred and Sixty Six

No 1888.

Sarah Ann Clarke

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership by birthright

2. Where was the place of birth of the patient?

Brighouse Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

During youth she was seriously disposed, character decided, but quiet & unobtrusive, no eccentricity, with average understanding —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

one of a large family, carefully trained, at home, & educated at Ackworth

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Habits industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

married at age of twenty five, three children, age eldest 3 years youngest 3 months, all living

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

no special pursuit religious turn of mind during youth at early age spoke few words in meeting for worship —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Reverses of circumstances have been experienced, with disappointment but seemingly producing no mental depression —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

none

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

no predisposition supposed to exist, a brother now in your Institution James Lindsey

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

This the first attack, no remote cause known, she got through her two first confinements admirably & suckled for several months, after the recent confinement she did not recover her strength, but suffered from nervous irritation of the womb subsequently, this affection now subsided for fortnight

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

about 29

15. What has been the duration of the present attack?

~~Present~~ The attack has been coming on for the last two months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

—— ——

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

—— ——

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Great depression of spirits, general debility, and apprehensions on religious subjects, sleep periodically deficient and constant complaining of "the pain" in region of womb

19. What were the first decided symptoms of mental aberration?

Desiring her baby should be removed, not being able to controll herself by her own statement, ~~that~~ directed that Knives should be removed &c constantly repeating the same words, "take the baby away"

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

chiefly religious, ~~subject~~

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

none

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has refused food very recently, no direct attempt at injury has been made

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

~~Before~~ Bodily health at this time, greatly restored.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

—— —— ——

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

ordinary means which have been successful as regards bodily health & removal of "the pain" for for the eight past

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Disorder increases, but symptoms vary

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

I D Clark
50 High St
Worcester

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive ~~Joseph Dawe~~ Sarah Ann Clark whom I last saw at 30 High St Worcester on the 17th day of May 1866 (*) a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Sarah Ann Clark

Signed, *Name,* Joseph Dawe Clark
Occupation (if any), Ironmonger
Place of Abode, 30 High St Worcester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this 18th Day of May (1866)
One Thousand Eight Hundred and Sixty six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Sarah Ann Clark
Sex and Age	Female 29
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	Tradesmans wife
Religious persuasion, as far as known	Friend
Previous Place of Abode	~~Brighouse~~ Worcester.
Whether First Attack	First
Age (if known) on First Attack	
When and where previously under Care and Treatment	
Duration of existing Attack	Two months
Supposed Cause	Confinement
Whether subject to Epilepsy	no
Whether Suicidal	care required
Whether Dangerous to others	Do Do
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Joseph Dawe Clark

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Joseph Dawe Clark
Occupation (if any), Ironmonger
Place of Abode, 30 High St Worcester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Herbert M Budd
being a (a) Fellow of the College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the seventeenth day of May 1866
at (c) 50 High Street in St Peters in the city of Worcester
in the County of Worcester separately from any other Medical Practitioner,
personally examined Sarah Ann Clark
of (d) 50 High St Worcester
and that
the said Sarah Ann Clark
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)— Appears greatly depressed in spirits - Says she has committed unpardonable sin - although there can be no grounds for such fear - Subject to fits of crying & fear of being taken away - Says she never expects to see her children again - Has been like this before

2. Other facts (if any) indicating Insanity communicated to me by others (g) —
An escape at night from her house while under charge of attendants & since. - Has resisted & struggled with her husband & mother who returned her

Signed, Name, Herbert M Budd
Place of Abode, High St Worcester

Dated this 18th day of May One Thousand Eight Hundred and Sixty six

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Female attendant - & Elizabeth Woollons who returned her husband & mother
+ Elizabeth Woollons

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Philip Henry Williams
being a (a) Member of the Royal College of Physicians in London
and being in actual practice as a (b) Physician
hereby certify, that I on the seventeenth day of May 1866
at (c) 50 High Street in the City of Worcester
in the county of Worcester separately from any other Medical Practitioner,
personally examined Mrs Sarah Ann Clark
of (d) 50 High Street Worcester and that
the said Sarah Ann Clark
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f). Appeared greatly depressed in spirits - Implied that she had committed some crime for which pardon was impossible without her abstaining from food, smiling, and conversation each day until after sunset - Stated that her sin was entirely between her Maker and herself and he had specially commanded her not to reveal it - That her emotion was excited and for the hope constant lamentation.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
From her Husband - That she is strangely altered - That she had insisted on the removal of her child - also of some Candlesticks & knives that were in her room - That she said she had only a grain of faith and that it would be lost unless she went into Broad Street
+ From Nurse - That she escaped into Broad St in the middle of the night - and gave no account of her object in making the

Signed, Name, Philip Henry Williams
Place of Abode, 28 Foregate St Worcester

Dated this eighteenth day of May One Thousand Eight Hundred and Sixty six.

+ Elizabeth Woollons.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No 1089.

Clara Jen[a] Stevens.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not Hereditary

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Ill Health recently — formerly Erysipelas &c —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 19 years

15. What has been the duration of the present attack? 6 or 7 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?
3 times, about 7 months each time
First Erysipelas flew to the brain — the 2 last attacks
appeared nervous accompanied by want of sleep

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Quite complete. 15 years the first time —
2 years & 3 months the last time

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
At all times a poor sleeper — but this
sleeping less & less appears to produce the illness

19. What were the first decided symptoms of mental aberration? restlessness & depression & indecision —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
nothing particular.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?
not at all

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
not at all.

23. What are the habits of the patient as regards personal cleanliness and decorum?
quite proper, but untidy —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
No — Nervousness & sleeplessness

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Once to York for 3 months, but recovered
6 weeks after Admission — 20 years ago.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
Once cured by Hydropathy — & Galvanism — been seen by
Hydropathers & Medical men at 2 different periods.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Not much change since the commencement,
but there are frequent glimmers of her usual
state.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
To the Overseers of Ripon & Dowking Monthly Meeting.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Clara J Stevens whom I last saw at The Boarding House Great Ayton on the twentieth day of 2nd month 1866 (a) a (b) A Person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Clara J Stevens

Signed, *Name,* Elizabeth Gray
Occupation (if any), Housekeeper at the Agricultural School
Place of Abode, Great Ayton
Degree of Relationship (if any), or other circumstances of connexion with the Patient None.

Dated this Day of
One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Clara Jemima Stevens
Sex and Age	Female — 39 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Resident in a Gentleman's Family. Teaching.
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Reigate Surry
Whether First Attack	No.
Age (if known) on First Attack	19
When and where previously under Care and Treatment	York Retreat — Matlock
Duration of existing Attack	7 months.
Supposed Cause	Ill health.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Alfred Horsnaill St. Margarets Rochester.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Jane B Horsnaill
Occupation (if any),
Place of Abode, St Margarets Rochester.
Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William A Lay
being a (a) Surgeon
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 20 day of February
at (c) Reading House Gt Ayton
in the County of York separately from any other Medical Practitioner,
personally examined Clara Jemima Stephens
of (d) Gt Ayton
and that
the said Clara Jemima Stephens
is of unsound mind (e) and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Clara Jemima Stephen says she has a dread of her
food is not doing properly and endeavours to reason with her
but is unable the mind becomes confused - it appears of
wasting disease wasting though she is quite decided against it

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mrs Stephens says she is very emotional and unable to care for herself - does not appear to know the value of money - orders a Signed, Name, William A Lay
Luncheon - Tea & Shillings &c

Place of Abode, Great Ayton

Dated this 20 day of February One Thousand Eight Hundred and Sixty 6-

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualifications entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned,
being a (a)
and being in actual practice as a (b)
hereby certify, that I on the day of
at (c)
in the county of separately from any other Medical Practitioner,
personally examined
of (d) and that
the said
is a (e) and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name,

Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

№1089. Clara J Stevens.

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

(a) House *or* hospital.

was admitted into this (a) as a Private Patient, on the

Day of 186 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

received (b).

Signed, _____

(c) Superintendent *or* proprietor of ———.

(c) _____

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Clara Jemima Stevens whom I last saw at Reigate on the 20 (Instant) day of 5th month 1864 (a) a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Clara Jemima Stevens

Signed, Name, Francis May on behalf of the overseers of Horsham Dorking & Guildford Monthly Meeting

Occupation (if any), None

Place of Abode, Reigate Surrey

Degree of Relationship (if any), or other circumstances of connexion with the Patient } no relation or connexion with Patient

Dated this 25 Day of 5 month One Thousand Eight Hundred and Sixty Six

To Dr Kitching

(c) Superintendent (d) Retreat York

(c) Proprietor or superintendent of.
(d) Describing the house or hospital by situation and name, if any.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Clara Jemima Stevens
Sex and Age	Female aged 40 years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	a governess in a family
Religious Persuasion, as far as known	a member of the Society of Friends
Previous Place of Abode	Charlton Kent
Whether First Attack	Yes – (Not correct)
Age (if known) on First Attack	about forty years
When and where previously under Care and Treatment	Yes where? Eight or nine months.
Duration of existing Attack	
Supposed Cause	Not known.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	E. H. Stevens. Myrtle Cottage Charlton Kent

(e) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (e) Fra. May

Occupation (if any), none

Place of Abode, Reigate Surrey

Degree of Relationship (if any), or other circumstances of connexion with the Patient } None

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Edward Vaughan Austin
being a (a) Member of the Royal College of Surgeons of London and a Licentiate of the Apothecaries Company of London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the ~~22nd~~ Twenty Second day of May 1866
at (c) the house of James Deane Lisburne Lane Reigate Surrey
in the County of Surrey separately from any other Medical Practitioner,
personally examined Clara Jemima Stevens
of (d) No 1 Lisburne Lane Reigate Surrey and that
the said Clara Stevens
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Countenance maniacal — Her delusion consists of a misapplication of great religious truths. She says that God has the power to forgive her sins which she hourly commits, but that as soon as she obtains his forgiveness, the desire to sin again is irresistible, and hence she knows no resistance nor happiness, and now despairs of ever again obtaining forgiveness — During conversation she is continually biting the ends of her fingers producing sores

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Miss Deane says that she never rests long in one place, but is continually wandering from room to room. Her conversation is always about herself & her wretched unhappy condition & that every thought & act of her life are sinful & past forgiveness she has become slovenly in her habits. When at fancy needle work she undoes all that she previously had done & commences again

Signed, *Name,* Edward Vaughan Austin

Place of Abode, Holmesdale Villa, Oakfield Reigate

Dated this Twenty third day of May One Thousand Eight Hundred and Sixty Six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Edward Howard
being a (a) Member of the Royal College of Physicians of London
and being in actual practice as a (b) Physician
hereby certify, that I on the Twenty Fourth day of May 1866
at (c) Reigate, in the house of James Deane Lisburne Lane
in the County of Surrey separately from any other Medical Practitioner,
personally examined Clara Jemima Stevens
of (d) No 1 Lisburne Lane Reigate Surrey and that
the said Clara Jemima Stevens
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Her countenance is wild and the general expression unsettled and very strikingly maniacal — Her mouth was stained with blood and her lips, from constant biting of her finger nails till they bleed. In an abstracted manner she is constantly moving and picking about the expressed herself — is anxious and in trouble on religious questions.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Miss Dean informed me that she had known Clara Jemima Stevens a long time and that there is a great change in her behaviour and appearance. That she wanders about the house by day or by night — and that from her general conduct she believes her to be of unsound mind —

Signed, *Name,* Edward Howard

Place of Abode, Redhill Surrey

Dated this 24th day of May One Thousand Eight Hundred and Sixty Six

222a

No 1090. Jane Ansell

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

was admitted into this (a) as a Private Patient, on the

. Day of 186 , and I

hereby transmit a Copy of the Order and Medical Certificates on which he was received (b)

(a) House or hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

(c) Superintendent or proprietor of ——.

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Jane Ansell

whom I last saw at 2 Langton Street St Lukes London

on the Twentysixth day of Septbr (a)

a (b) Lunatic as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) *Lunatic, or an Idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said Jane Ansell

Signed, *Name,* Joseph Henry Ansell

Occupation (if any), Marble Mason

Place of Abode 2 Langton St Old Street London

Degree of Relationship (if any), or other circumstances of connection with the Patient Brother

Dated this Twentysixth day of Septbr

One Thousand Eight Hundred and Sixty six

To John Kitchiny MD

(c) Superintendent of the Retreat York

(c) *Proprietor or superintendent of.*

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Jane Ansell
Sex and Age	Female Age abt Forty yrs
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Compositor
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	~~Deyrey~~ St Pentonville
Whether First Attack	yes
Age (if known) on First Attack	Abt 38 yrs
When and where previously under Care and Treatment	no
Duration of existing Attack	Abt two years
Supposed Cause	unknown
Whether subject to Epilepsy	no
Whether Suicidal	uncertain
Whether Dangerous to others	At times difficult to manage
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	(Struck out by me Jos Ansfield)
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	The Patient was examined by the undersigned Medical Men both the Patient was by the undersigned Medical Men both the Patient was by the undersigned Medical Men both the Patient was

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Buxton Shillitoe
being a (*a*) Fellow of the Royal College of Surgeons of London
and being in actual practice as a (*b*) Consulting Surgeon.
hereby certify, that I, on the twenty fifth day of May.
at (*c*) No 2 Langton St. St Lukes - London
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Jane Ansell
of (*d*) 2 Langton St - St Lukes London formerly needlewoman. and that
the said Jane Ansell
is a (*e*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (*f*)
Inability to apply herself to any occupation - almost constantly muttering to herself, swaying her body backwards & forwards - then saying that it was not herself who spoke or moved her body. She hears voices constantly from the walls & floor & relates conversations that she hears.-

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*g*)
Mrs Tabitha Bidgood her Landlady of No 2 Langton St St Lukes states that ~~the~~ Jane Ansell says that all the household will be murdered that the voices tell her so. also that she was to cut her own throat. - She looks very excited at these times & often talks most extravagantly

Signed, *Name,* Buxton Shillitoe

Place of Abode, 34 Finsbury Circus

Dated this twenty fifth day of May One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Bevill Peacock
being a (*a*) Fellow of the Royal College of Physicians of London
and being in actual practice as a (*b*) Physician -
hereby certify, that I on the 26th day of May
at (*c*) No 2 Langton St, Saint Lukes
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Jane Ansell
of (*d*) No 2 Langton St - and that
the said Jane Ansell
is a (*e*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (*f*) that she is evidentally a person of originally fresh mental power & that she now labours under various delusions. supposing that persons, or spirits, talk to her from the walls & ceilings of the rooms & says that she is awoke by them at night. She is also constantly muttering to herself

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*g*) I am further informed by Joseph Ansell, her brother, & Mrs Tabitha Bidgood, her landlady, that she occasionally becomes very excited, without any sufficient or obvious cause, & has threatened to inflict injuries on them around her, stating that she was told so to do by the voices or spirits that talk to her.

Signed, *Name,* Thomas Bevill Peacock

Place of Abode, 20 Finsbury Circus

Dated this twenty sixth day of May One Thousand Eight Hundred and Sixty six.

No 1090 - Jane Ansell.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8 10, 11, 12, 13.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
.
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the fourth day of June 1861
at (c) the Retreat York
in the County of York separately from any other Medical Practitioner,
personally examined Jane Ansell
of (d) 2 Langton Ter St Lukes London formerly Middlesex and that
the said Jane Ansell
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

Rambling incoherent conversation - a belief that numerous persons are talking to her & that some one is singing in her mouth.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Samuel William North

Place of Abode, 31 Castlegate York

Dated this fourth day of June One Thousand Eight Hundred and Sixty six

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

I, the undersigned, William Porter
being a (a) Member of the College of Surgeons London
.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the fourth day of June
at (c) the Retreat York
in the County of York separately from any other Medical Practitioner,
personally examined Jane Ansell
of (d) 2 Langton Ter St Lukes London formerly Middlesex and that
the said Jane Ansell
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) as mentioned above—
I cannot tell the day of the week or the month & frequently that person is continually talking to herself day & night

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Porter

Place of Abode, 14 Petergate - York

Dated this fourth day of June One Thousand Eight Hundred and Sixty six -

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No 1091.
C. Caldwell

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

He has not

2. Where was the place of birth of the patient? St Helens Lancashire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

None -

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Very sensitive & gentle - No decided peculiarity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

He had a Tutor at home - Read with a clergyman & finished his education at Durham University

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation - steady until about 20 when he began to rather intemperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Has never been married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None to affect his mind -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

He has not

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

None to

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

There is no hereditary predisposition - No other member of the family remembered to be insane -

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Intemperance which brought on monomania -

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

He was 30

15. What has been the duration of the present attack?

Ten years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The malady has been continuous.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

There has been no interval of complete sanity -

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

None.

19. What were the first decided symptoms of mental aberration?

A disposition to ramble & fear of being met -

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He is very childish in his amusements - always choosing his own -

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

He has never attempted to hurt ~~his~~ any one - or shown the least disposition to do so -

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He has never refused his food since he has been at home - nearly eight years -

23. What are the habits of the patient as regards personal cleanliness and decorum?

He habits are clean & orderly -

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

His bodily health is excellent -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

He has been under Dr Winslows care at Hammersmith London for two years - He derived no benefit -

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

He has had no medical advice since his return home - nearly eight years.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

His disorder seems stationary -

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

The accounts can be sent quarterly to me & I will be responsible for the payment

Sarah Caldwell
Whitley Northwood

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Charles Caldwell

whom I last saw at Higher Whitley

on the Third day of June 1866. (*)

a (*) person of Unsound Mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Charles Caldwell

Signed, *Name,* Sarah Caldwell.

Occupation (if any), None

Place of Abode, Higher Whitley

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this Third Day of June

One Thousand Eight Hundred and Sixty Six

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Charles Caldwell
Sex and Age	40
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentleman — No previous occupation
Religious persuasion, as far as known	Protestant
Previous Place of Abode	Whitley — Northwich — Cheshire
Whether First Attack	First Attack
Age (if known) on First Attack	28 30
When and where previously under Care and Treatment	Dr Winslows Sussex House — Hammersmith
Duration of existing Attack	Ten Years
Supposed Cause	Intemperance
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	Has been seen so far —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	By Inquisition March 19th 1868.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Sarah Caldwell — Whitley Northwich Cheshire

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Sarah Caldwell

Occupation (if any),

Place of Abode, Whitley — Northwich — Cheshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother — Sister

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Smith
being a (a) Doctor of Medicine of the University of Edinburgh
and being in actual practice as a (b) Physician
hereby certify that I, on the Third day of June 1866
at (c) Oon Whitley
in the County of Chester separately from any other Medical Practitioner,
personally examined Charles Caldwell Gentleman at the house of his sister Mrs Caldwell
of (d) Oon Whitley
the said Charles Caldwell and that
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
His own declaration that all his property of value was in pending the war of Europe. His declaration that he was more than 6 feet high - and his general deportment

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, John Smith
Place of Abode, Rockton Heath
Dated this Third day of June One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles Williams
being a (e) Surgeon ~~& Apothecary~~ Member of the Royal College of Surgeons England & a Licentiate of the Apothecaries Company
being in actual practice as a (b) Surgeon & Apothecary
hereby certify, that I on the Third day of June 1866
at (c) Oon Whitley - at the house of his sister Mrs Caldwell
in the county of Chester separately from any other Medical Practitioner,
personally examined Charles Caldwell
of (d) Oon Whitley
the said Charles Caldwell Gentleman and that
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
His own statement that he kept upwards of ten million pounds. that he was over 6 feet high &c. & his general demeanour

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) the Rev
always talking nonsense & his general character & demeanour

F. E. Belcombe
Incumbent of
Whitley (CW)

Signed, Name, Charles Williams
Place of Abode, Cavalton Northwich
Dated this Third day of June One Thousand Eight Hundred and Sixty Six

No 1092.

Annie M Lucas.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Husband was a member of the Society. but resigned on his marriage

2. Where was the place of birth of the patient?

Linton, Suffolk

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Was an infant suffered some months from Infantile Fever

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Strong determination of character & large share of intelligence

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Yes at two Boarding Schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Farmers daughter - Engaged a little in tuition - Of industrious temperate & conduct has always been regular.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married May 17. 1865 - Has 1 child 6 years old

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Not, so far as known

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Circumstances in life quite moderate, but no reverses or sources of external moment have affected her

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Suffered, 2 or 4 years since, acutely from Rheumatism, in hands first and particularly

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Difficulties attending nursing after confinement - Pecuniary circumstances also supposed to have had considerable effect. - This is the first attack

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

24

15. What has been the duration of the present attack?

About 10 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Spirits were much depressed — Sleep insufficient from pain in breast for a week or so

19. What were the first decided symptoms of mental aberration?

Inability to remember, or to act for herself in simple matters
Attempt at self destruction by strangulation

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Fancies there is no money. That we shall be burned in the street —
Also that her father & mother will be ruined —
Also had some fears as to her eternal condemnation
Latterly she has not made any exclamation of this kind

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has made more than one attempt at suicide.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Persistently refuses food, which has to be forced down almost always

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very cleanly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Has always lijoyed excellent health since childhood

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Opiates have been administered & aperient medicine, but almost ineffectually — Has been under medical care

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Appears to take more hold — none that can be called lucid intervals — The disorder now manifests itself in the form of settled dulness & apathy. she is very silent & still.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas W. Lucas,
Luton,
Beds.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Annie Mary Lucas

whom I last saw at 143 Hemingford Road London

on the Third day of 7th month —(*)

a (b) person of unsound mind as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Annie Mary Lucas

Signed, *Name,* Thomas W Lucas.

Occupation (if any),

Place of Abode, Luton Beds

Degree of Relationship (if any), or other circumstances of connexion with the Patient ~~Low wife~~ — Father in Law —

Dated this ninth — Day of 7th month

One Thousand Eight Hundred and Sixty six

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Annie Mary Lucas
Sex and Age	Fet
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	At home with parents
Religious persuasion, as far as known	Independent
Previous Place of Abode	Theberton, Suffolk
Whether First Attack	Yes
Age (if known) on First Attack	First Attack
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	About 10 days
Supposed Cause	Difficulties attending Nursing after Confinement also Pecuniary Matters
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	Has been examined
Name and Address of Relative to whom Notice of Death to be sent.	Joseph Lucas, 143 Hemingford Road, London N

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Joseph Lucas

Occupation (if any), Accountant

Place of Abode, 143 Hemingford Road, London, N

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Frederick Giles Brockholm
being a (a) M.D. M.R.C.S. & L.S.A.
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the Ninth day of July 1866.
at (c) 143. Hemingford Rd. Barnsbury N.
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Annie Mary Lucas
of (d) 143 Hemingford Rd. aforesaid — and that
the said Annie Mary Lucas
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) not being able to elicit any answer from questions put to her, her sullenness & determination not to speak, as also the great difficulty to get her to take nourishment of any description — not obeying nature's calls & having a total disregard of everything & every one near & dear to her.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) — She has twice attempted self-destruction by tying a handkerchief around her neck. so I am informed by her husband

Signed, *Name,* Fred K.G. Brockholm
Place of Abode, 13. Kilmond Villas Barnsbury Park N.

Dated this Ninth day of July One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Buxton Shillitoe
being a (a) Fellow of the Royal College of Surgeons London
and being in actual practice as a (b) Consulting Surgeon
hereby certify, that I on the seventh day of July
at (c) 143 Hemingford Road Barnsbury N.
in the county of Middlesex separately from any other Medical Practitioner,
personally examined Annie Mary Lucas (Wife of Joseph Lucas Jr.)
of (d) 143. Hemingford Road and that
the said Annie Mary Lucas
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
General restlessness & appearance of great nervous excitement... Great difficulty in obtaining answers to any questions. Obstinately refusing to take any nourishment. — Total disregard to every one & everything about her.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
She has twice (so I am informed by her husband Joseph Lucas Jr.) attempted self destruction by tying a handkerchief around her neck

Signed, *Name,* Buxton Shillitoe
Place of Abode, 34 Finsbury Circus

Dated this tenth day of July. One Thousand Eight Hundred and Sixty six

No 1093.

Elizabeth Albright.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is ~~he (or~~ she) in any way connected with the Society of Friends? Yes - a Member

2. Where was the place of birth of the patient? Ratcliff London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? nothing particular

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? not much is known of her early history

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was Educated at Ackworth

6. To what occupation was the patient brought up; and what were ~~his (or~~ her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period? She resided with her Parents all of Age

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. She was about 25 yrs of Age when Married has had seven Children Ages from 2 yrs to about 14 or 15

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? she was never very bright

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Her Husband was Insolvent at his decease but this circumstance did not appear to affect her

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? She says she was delicate when young

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? She has a Brother in the Retreat at York

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The first decided Symptoms of Insanity were at her Confinement of a Child now about 9 Years of age from which she has never fully Recovered - She was at the time about 31 Years old

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? about 31 years

15. What has been the duration of the present attack? for several years she has gradually growing worse

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
She has been of weak mind ever since the first attack

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? See the answer to the 13th query

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
The state of her mind is such as to render her unfit to take care of her self

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No

23. What are the habits of the patient as regards personal cleanliness and decorum? nothing remarkable in these respects

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
She appears to be in good health - but at times complains of her breathing

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
She has been under private care only

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? increasing

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Bally Monthly

Meeting Isaac Milner
Hargreaves & Co
Eyre Lane
Sheffield

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Albright

whom I last saw at no 60 Clarence St Sheffield

on the 28 day of July 1866 (a)

a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Elizabeth Albright

Signed, *Name,* James Wall

Occupation (if any), Not in Business

Place of Abode, The Holly Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient A Member of the Com's Committee under whose Care the Patient has been

Dated this 30th Day of July 1866

One Thousand Eight Hundred and Sixty Six

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length ..... Elizabeth Albright

Sex and Age ..... Fem. Age 41

Married, Single, or Widowed ..... Widow

Condition of Life, and previous Occupation (if any) ..... Assistant in a Shop

Religious persuasion, as far as known Members of the Society of Friends

Previous Place of Abode ..... Sheffield no 60 Clarence St

Whether First Attack 1853

Age (if known) on First Attack 32

When and where previously under Care and Treatment .... at Wordsworth in 1854 after her confinement of a Child

Duration of existing Attack ..... more or less for nine years

Supposed Cause ..... after confinement

Whether subject to Epilepsy ..... no

Whether Suicidal ..... no

Whether Dangerous to others ..... no

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... No

Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners ..... No

Name and Address of Relative to whom Notice of Death to be sent. Clerk of Batty Moor Lunatic Asylum

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Wall

Occupation (if any),

Place of Abode, The Retreat

Degree of Relationship (if any), or other circumstances of connexion with the Patient

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Ryan

being a (a) Doctor of Medicine of the University of Edinburgh, and a Member of the Royal College of Surgeons

and being in actual practice as a (b) General Practitioner

hereby certify that I, on the twenty sixth day of July 1866

at (c) Sheffield 20 & 6 Clarence Street

in the County of York personally examined Elizabeth Albright at her residence

of (d) Sheffield Widow 20 & 6 Clarence Street and that

the said Elizabeth Albright

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

She labours under delusions — believes herself to be followed and watched by persons who wish to injure her. Believes that she is robbed, even by those who are helping her. Believes that I am keeping her prisoner. Is unsettled — and rambling & incoherent. Is unable to take care of her self or children. Is absolutely helpless. Says she have to count 4 watches. Because she gives up to many Children

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Most of the symptoms detailed above have been related to me by Mrs Allen, as observed by herself. My informants were Rogers Brookhead, Mrs Brookhead his wife, living at 6 Clarence St Sheffield — Jos Jeary, Bath of the Hills, Sheffield and a person who knew her during her confinement in the Asylum recently. The person is a Mrs Allen, widow, but whose address I do not know

Signed, Name, John Ryan

Place of Abode, 6 Bell of Sheffield

Dated this twenty eighth day of July, One Thousand Eight Hundred and Sixty six.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.,—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Carr

being a (a) one Practitioner of the Apothecaries Company

and being in actual practice as a (b) General Practitioner

hereby certify that I on the twenty fourth day of July 1866

at (c) Sheffield 20 & 6 Clarence Street

in the county of York personally examined Elizabeth Albright separately from any other Medical Practitioner,

of (d) Clarence Street Sheffield Widow and that

the said Elizabeth Albright at her residence 20 & 6 Clarence Street

is a (e) a person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) She states that she is very Ill — is in bed. But is capable of doing any thing, and cannot supply herself to any thing. She thinks she ought to be prisoner against, and cannot encourage the question why she is not. X

2. Other facts (if any) indicating Insanity communicated to me by others (g) She has told her Friends that she ought to have more Children, although she has had a large Family. This I learn from Mrs Allen Nearly No 6 Clarence Street

Signed, Name, John Carr

Place of Abode, 15, Eyre Street Sheffield

Dated this 28th day of July — One Thousand Eight Hundred and Sixty six.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.,—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

X She is under the impression that her Reason is wrong, and she told me that if she could have more Children, it would put her to rights.

J. C.

No 1094
Sarah Benson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Geo. Benson.

15/-

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Benson whom I last saw at Fulford. on the 6th day of 8th Month. (*) a (*) person of unsound mind, as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said Sarah Benson.

Signed, *Name,* George Benson
Occupation (if any), Manufacturer.
Place of Abode, Bishopthorpe Road York.
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother.

Dated this 6th Day of 8th Month
One Thousand Eight Hundred and Sixty Six.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Sarah Benson
Sex and Age	Female. aged 58.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Middle Class.
Religious persuasion, as far as known	Friend.
Previous Place of Abode	Fulford.
Whether First Attack	no.
Age (if known) on First Attack	36.
When and where previously under Care and Treatment	Friends Retreat.
Duration of existing Attack	Six weeks.
Supposed Cause	Bad weather.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Geo. Benson.

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (*) Geo. Benson
Occupation (if any), Manufacturer.
Place of Abode, York.
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, William Potter being a (a) member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the sixth day of August at (c) 24 Petergate York in the County of York separately from any other Medical Practitioner, personally examined Sarah Benson of (d) Spinster of Fulford near York and that the said Sarah Benson is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Her conversation is vague & rambling - is very excited & imagines that many people are set against her

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Potter

Place of Abode, 24 Petergate - York

Dated this sixth day of August One Thousand Eight Hundred and Sixty six.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or *as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Samuel William Wyatt being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the Sixth day of August at (c) 31 Castlegate York in the county of York separately from any other Medical Practitioner, personally examined Sarah Benson of (d) Fulford nr York single woman and that the said Sarah Benson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz—

1. Facts indicating Insanity observed by myself (f) Rambling conversation ~~that the~~ appearance Not sound person in an inquiry - She is restless and thinks that a few ~~of the~~ are against her

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Samuel William Wyatt

Place of Abode, 31 Castlegate York

Dated this Sixth day of August One Thousand Eight Hundred and Sixty six

No 1095.
Lucia Batteson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

No 1095

Lucia Bateson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Lucia Bateson whom I last saw at Newlands, Licard, Cheshire on the twenty third day of August 1866 (*) a (*) person of unsound Mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Lucia Bateson

Signed, *Name,* William Henry Bateson
Occupation (if any), Master of St Johns College
Place of Abode, Cambridge
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this twenty third Day of August
One Thousand Eight Hundred and Sixty Six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Lucia Bateson
Sex and Age	Female 45
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Newlands, Licard
Whether First Attack	No
Age (if known) on First Attack	eighteen
When and where previously under Care and Treatment	No Retreat
Duration of existing Attack	four days
Supposed Cause	Death of her Mother
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	William Henry Bateson St Johns College Cambridge

Please answer this query

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) W. H. Bateson
Occupation (if any), Master of St Johns College
Place of Abode, Cambridge
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Isaac Eyerley being a (a) Fellow of the Royal College of Surgeons and a Licentiate of Apothecaries' Hall London and being in actual practice as a (b) Surgeon hereby certify that I, on the 21st day of August 1866 at (c) Newlands-Lescard in the County of Chester personally examined Lucia Bateson separately from any other Medical Practitioner, of (d) Newlands-Lescard- Spinster and that the said Lucia Bateson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Quarrelsomeness - Gambling and unconnected discourse - alternate cheerfulness and distress - delusions upon religious points, saying that she has a special Mission from God to convert the world &c - symptoms and delusions such as have observed on many previous attacks.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Excited movements - greatly altered manner - throwing her clothing &c about in confusion.
Informants - her sister and her friends Mrs Higgs Mrs Myers

Name of Sister must be inserted

Signed, Name, Isaac Eyerley
Place of Abode, Lescards - Cheshire
Dated this 21st day of August - One Thousand Eight Hundred and Sixty six -

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Sheen being a (a) Member of Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify, that I on the 22nd day of August 1866 at (c) Newlands Lescard in the county of Chester separately from any other Medical Practitioner, personally examined Lucia Bateson of (d) Newlands Lescard Spinster and that the said Lucia Bateson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Symptoms of fits of excitement - incoherent talk, extraordinary religious delusions, at the time in great distress, at another times symptoms of fits of laughter.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) great change in her manner Person herself - wet and wet every thing in confusion
Informants - her sister and friend Mrs Myers Mrs Speigel

Name of Sister must be inserted

Signed, Name, William Sheen
Place of Abode, Lescard Cheshire
Dated this 22nd day of August - One Thousand Eight Hundred and Sixty six

No 1096.

Mary Stephens Ford.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No –

2. Where was the place of birth of the patient? Falmouth. Maine

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? I am not aware that there was

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? ✗
As my personal knowledge of Mrs Ford extends to the last 14 or 15 years of
I am not before to answer the questions which are marked thus +

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? +

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
during some years of the period over which my knowledge of Mrs Ford extends she was a Principle of the Friends School
for young ladies and for several was under especially as her services much appreciated by the boards
of the young ladies who sent to her School –

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
married about 9 or 10 years ago – There were no children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
Nothing beyond her scholastic employment

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
I believe not

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
I am not aware that she did

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? I believe that at the death of her Husband
the most unequivocal symptoms of mental derangement occurred, and they
have always maintained a periodicity, in some measure, I fancy, connected
with the Centennial period, or at least much aggravated during that time.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?
somewhere between 30 & 40

15. What has been the duration of the present attack?
some [illegible] months, when being accidentally seen intoxicated

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? I am not prepared to say how often any paroxysmal stories having been cable into acquisition about 2 years since

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
during the last 2 years I should say during which might be found a lucid interval great depression of spirits existed amounting to melancholia

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
I think not — [illegible] as regards elevation of Spirits

X 19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
the first time I visited 1867. the delusion that she was on her trial before the Papal Inquisition & that she was condemned to death banished — and subsequently that there exists a conspiracy against her

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? I think not

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
No

23. What are the habits of the patient as regards personal cleanliness and decorum?
she is the habit of rushing into a room in a state of partial nudity and using language of a very objectionable kind

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
while under my observation her health has been very fair — insomnia generally prevailing

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
she has not

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
her moral management has been attended to by the friends with whom she has resided

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
I should say that the malady seems to increase in severity

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Her Brothers. Hoskins

J Merrick

George Fowdrey MRCS
Hayle — Cornwall — Aug 16th 1866 —

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Stephens Ford whom I last saw at London on the twenty seventh day of August 1866. (a) a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

John will fill up this form

Subjoined is a Statement respecting the said Mary Stephens Ford

Signed, *Name,* John Richards
Occupation (if any), Clerk in order
Place of Abode, Kelvedon, Essex
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this twenty seventh Day of August
One Thousand Eight Hundred and Sixty six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Stephens Ford
Sex and Age	Female 47 years
Married, Single, or Widowed	widow
Condition of Life, and previous Occupation (if any)	Has kept a boarding school for young ladies
Religious persuasion, as far as known	probably Wesleyan
Previous Place of Abode	Hagle Cornwall Staying at 3 Newland Hills Grange Road, Canterbury, Middlesex
Whether First Attack	first attack
Age (if known) on First Attack	46 years
When and where previously under Care and Treatment	no where
Duration of existing Attack	perhaps a twelve month
Supposed Cause	want of more self-discipline
Whether subject to Epilepsy	no.
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Mrs. J. Richards - Kelvedon, Essex.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Richards
Occupation (if any), Clerk in order.
Place of Abode, Kelvedon, Essex
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, or, &c.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Arthur Forten Crebb being a (a) M.D. London — M.R.C.S. & L.S.A.

and being in actual practice as a (b) Genial Practitioner

hereby certify that I, on the Twentieth day of August 1866

at (c) 3 Newland Villas Canonbury — Grange Road N.

in the County of Middlesex separately from any other Medical Practitioner,

personally examined Mary Stephens Ford

of (d) 3 Newland Villas — Canonbury. Grange Road N.

and that the said Mary Stephens Ford

is a (e) Person of Unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f): She imagines herself to be different characters as Stephens Daughter — sees faces of persons in the trees of the garden & about her bed — Conceives that she may be one of those on whom the future destiny of the world depends — Exciting sexual propensities

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Great sexual excitement, especially about Menstrual periods Delusions & great despondency — Various delusions concerning Matrimonial engagements — Ideas with regard other friends being represented by Devils &c &c

Communicated by her Brother & Sister-in-Law Chas. Richards

Signed, Name, Arthur Forten Crebb

Place of Abode, 37 Compton Terrace Kingsbury

Dated this 23 day of August One Thousand Eight Hundred and Sixty 6

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, or, &c.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, James Grey Glover being a (a) Doctor of Medicine of Edinburgh, L.R.C.S. Edin

and being in actual practice as a (b) General practitioner

hereby certify, that I on the 23rd day of August

at (c) 3 Newland Villas Grange Rd Canonbury

in the county of Middlesex separately from any other Medical Practitioner,

personally examined Mary Stephens Ford

of (d) 3 Newland Villas Stephens 1866

the said Mary Stephens Ford and that Stephens 1866

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f).

Great dominance of the Erotic passion shown by close conversation with her.

The grave derangement of Vision & apparitions some little ago. She is reflecting upon her former habits & ~~conduct~~ in conversation quite absurd & their present nature. Her delusions of these as if they were important

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her appearance to others is a state of nudity

& Chas. Richards. Communicated by her Brother and Sister in law J. G. G.

Signed, Name, James Grey Glover M.D

Place of Abode, 53 Compton Terrace

Dated this twenty third day of August One Thousand Eight Hundred and Sixty Six.

No 1096.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 30th day of April 1868, of Mary Stephens Ford a Private Patient in The Retreat, ~~House,~~ York, to St Luke's ~~House,~~ Hospital, London.

Given under our hands this 31st day of March in the year of Our Lord One Thousand Eight Hundred and Sixty eight

James Wilkes
W G Campbell
} Commissioners in Lunacy.

ORDER.

I,* John Richards the undersigned having Authority to discharge Mary Stephens Ford a Private Patient in The Retreat, ~~House,~~ York hereby order and direct that the said Mary Stephens Ford be removed therefrom to St Luke's ~~House,~~ Hospital, London

To be filled up + Signed

Given under my hand this* first day of April in the year of Our Lord One Thousand Eight Hundred and Sixty eight

(Signed) John Richards.

Place of Abode North Repps, Norwich

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

1000 3 | 46—H & S
1751

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No 1097.

Sarah Bennett Pollard.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? yes a member by birth

2. Where was the place of birth of the patient? North Crawley Buckinghamshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? no

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? good disposition, rather self willed, good share of natural understanding neither greater nor less than is common, no precocity of intellect observable

5. Were the understanding and the affections much cultivated in very early life? to what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Ackworth School two years, previously a governess at home

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
always steady correct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
married 25-Oct-26 no Child & would be 7 next birth day

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? not aware

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? no

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? no

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
Jaundice

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
Not to my knowledge

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
Overwork & atmosphere

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

36 years

15. What has been the duration of the present attack?

6 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No change by friends

19. What were the first decided symptoms of mental aberration?

Yes

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Chiefly religious

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? no

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very clean with the strictest integrity

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Liver disordered

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. no

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Every medical assistance without effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

to me Henry L. Pollard
100 Kirkgate
Leeds

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Bennett ~~James~~ Pollard whom I last saw at Cranfield on the third day of ninth month (*) a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Sarah Bennett Pollard

Signed, Name, Henry L Pollard
Occupation (if any), Grocer
Place of Abode, 100 Kirkgate Leed
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Husband

Dated this third Day of Ninth Month
One Thousand Eight Hundred and Sixty 6

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Sarah Bennett Pollard
Sex and Age	Female aged 35 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Tradesmens Wife
Religious persuasion, as far as known	A Friend
Previous Place of Abode	Cranfield, Bedfordshire
Whether First Attack	yes
Age (if known) on First Attack	about 35.
When and where previously under Care and Treatment	no where
Duration of existing Attack	about 6 months
Supposed Cause	probable, Jealousy
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Henry L Pollard 100 Kirkgate Leeds

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (*) Henry L Pollard
Occupation (if any), Grocer
Place of Abode, 100 Kirkgate. Leeds.
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Husband

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra. Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Henry Headley being a (a) Fellow of the Royal College of Surgeons England & Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon & Apothecary hereby certify that I, on the thirtieth day of August at (c) Bromham Road Cranfield in the County of Bedford separately from any other Medical Practitioner, personally examined Sarah Bennett Pollard of (d) Seeds Wife to a Grocer and that the said Sarah Bennett Pollard is a (e) person of unsound mind & proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Suspects that persons are talking about her life
Wandering about in many streets & places

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
actions proved that by Those marked
& unusual mental phenomena
correct & exhibited, but not violent.

by Thomas Grimes
his wife
+ A. L. Grimes
their daughter

Signed, Name, Henry Headley
Place of Abode, Hobbs Hall
Dated this thirtieth day of August One Thousand Eight Hundred and Sixty Six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra. Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Hammett Hadley being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I on the 31 day of August 1866 at (c) Bromham Road Cranfield in the county of Bedford separately from any other Medical Practitioner, personally examined Sarah Bennet Pollard of (d) Seeds Wife to a Grocer and that the said Sarah Bennet Pollard is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
~~From~~ A strong impression that a power or persons have
access upon her life & manner, for an instant to insert
herself alone.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Conduct indicative of a morbid condition of
the cerebral functions is observed

derived from
Thomas Grimes.

Signed, Name, Hammett Hadley
Place of Abode, Newport Pagnell Bucks
Dated this 31 day of Aug 1866
Hundred and Sixty Six

No. 1098.
Hurtley Hall.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

By birthright a member.

2. Where was the place of birth of the patient?

Leeds.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

+ From the date of birth to the completion of dentition his health suffered from the ill treatment of a nurse.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Very quick in learning and precocious. though somewhat excitable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at Ackworth & excelled in Latin. Received a general Education but was not pushed into very early training

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

A draper was very industrious, temperate, of regular habits especially during youth, the lived fastly during the last few years.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

No.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Has worked most industriously in a general business in Melbourne.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

While in business he suffered no marked losses, but generally speaking was fortunate. Declining mental powers severed his partnership & this induced him to spend his money recklessly.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

+ His parents believe his physical energies were stunted by bad feeding, & improper medicinal treatment during infancy at the hands of a nurse

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

One uncle died from the effects of drinking. No hereditary distraction traceable.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Immediate cause supposed to be excessive mental application in forming & keeping up an increasing business.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Origin dates twelve months back.

15. What has been the duration of the present attack?

Twelve months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

---

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Previous to developed signs of mental disorder he became very sleepy & showed a general apathy and indifference to his friends and business

19. What were the first decided symptoms of mental aberration?

Reckless spending of his money on useless articles after dissolution of partnership.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

reported — Suicidal. A general indifference to all subjects. Says his uncle has left him ~~estates~~. Says he possesses Burn's cloak. — That he has squared the circle

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has not shown any acts of destruction to others. attempted to fire his cabin

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Eats well, & attempted to throw himself overboard on his passage to England

23. What are the habits of the patient as regards personal cleanliness and decorum?

gentlemanly.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Costiveness, seminal emissions?

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

David Hall

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Hurtley Hall

whom I last saw at York.

on the fifth day of 9th Month (*)

a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Hurtley Hall

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, *Name,* David Hall

Occupation (if any), Joiner and Builder

Place of Abode, Victoria Road, Leeds.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this fifth Day of 9th Month.

One Thousand Eight Hundred and Sixty Six.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Hurtley Hall
Sex and Age	Male, 42 years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	General Merchant
Religious persuasion, as far as known	formerly friend tho' sent w his resignation some time back
Previous Place of Abode	Melbourne
Whether First Attack	Yes.
Age (if known) on First Attack	about 41.
When and where previously under Care and Treatment	~~No~~ been under no treatment previously
Duration of existing Attack	about a year
Supposed Cause	Softening of the brain
Whether subject to Epilepsy	no
Whether Suicidal	Reported he attempted to throw himself overboard on the voyage home
Whether Dangerous to others	not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	David Hall Victoria Road Leeds

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (*) David Hall

Occupation (if any), Joiner & Builder

Place of Abode, Victoria Road

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, David Mann
being a (a) Member of the Royal College of Surgeons and a Licentiate of the Apothecaries Company
and being in actual practice as a (b) Surgeon and Apothecary
hereby certify that I, on the fourth day of September. 1866
at (c) 61 Victoria Road, Leeds
in the County of York separately from any other Medical Practitioner,
personally examined Mr Hurtley Hall — a general dealer
of (d) 61 Victoria Road, Leeds & formerly of Melbourne and that
the said Hurtley Hall
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) General inconsistency in all topics of conversation. thus, he says he left Melbourne for England on 4th April 1866 whereas he left on 6th June 1866. States he had both calm & rough passage he owned at the same time

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)—
Has shown tendency to destroy himself. & destructive to property.
His brother Mr David Hall, informed me of the latter facts

Signed, Name, David Mann, Surgeon
Place of Abode, 3 Victoria Road, Leeds.

Dated this fourth day of September One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Edward Atkinson
being a (a) Member of the Royal College of Surgeons &c
and being in actual practice as a (b) Surgeon
hereby certify, that I on the fourth day of September 1866.
at (c) 61 Victoria Road, Leeds.
in the county of York separately from any other Medical Practitioner,
personally examined Mr Hurtley Hall
of (d) 61 Victoria Road, Leeds, & formerly of Melbourne Australia and that
the said Hurtley Hall
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Alternately abstracted, & talkative. Speaks volubly of things of wh. he could not possibly have personal knowledge — Has a wild, restless manner — sometimes breaks off in the midst of a sentence & concludes on a totally different subject

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) His Father told me that, last night, left his father's house by the window, & wandered many miles into the country — where he was found at midnight after 18 hours incessant walking (fasting) — filling his hat with mushrooms.

Signed, Name, Edward Atkinson
Place of Abode, 2 Albion Place — Leeds.

Dated this fourth day of September One Thousand Eight Hundred and Sixty six.

No 1099.
Martha Foster.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the place of birth of the patient? Denholme ~~fst~~ n Bradford

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Always reserved.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was brought up and educated as children of a well to do padesman are usually brought up. She received her education at Boarding Schools.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

None. — At present not cleanly in her habits.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the oldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

None.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Not known.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? About 22.

15. What has been the duration of the present attack? About 2 years.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? ——

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Not known

19. What were the first decided symptoms of mental aberration? — Melancholy.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

A great dislike to her near relatives.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Occasional violence towards her mother.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Often refuses her food.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Dirty & untidy.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Feeble constitution

1916
1842
74

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never been from home.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Kind & gentle treatment at home.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing, lucid intervals but few.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Jonathan Knowles Jun.
Denholme Gate Brewery
Post Town — Bingley.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Martha Foster,

whom I last saw at Denbolme.

on the 20th day of September 1866. (*)

a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Martha Foster

Signed, *Name,* Jonathan Knowles Junr.

Occupation (if any), Brewer

Place of Abode, Denbolme Gate

Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle and Trustee under her late father's will.

Dated this 20th Day of September 1866.

One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Martha Foster.
Sex and Age	Female. Age 24.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	None
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Denbolme
Whether First Attack	First attack
Age (if known) on First Attack	About 22 years.
When and where previously under Care and Treatment	at home
Duration of existing Attack	About 2 years
Supposed Cause	Not known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	At times violent
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Jonathan Knowles Junr. Denbolme Gate. Nr Town Bingley.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Jonathan Knowles Junr.

Occupation (if any), Brewer

Place of Abode, Denbolme Gate Nr Town Bingley.

Degree of Relationship (if any), or other circumstances of connexion with the Patient

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 20th day of September 1866
at (c) Scawins Hotel York
in the ~~County of~~ City of York separately from any other Medical Practitioner,
personally examined Martha Foster single woman the daughter of
of (d) Hannah Foster Denholme nr Bradford Yorkshire and that
the said Martha Foster
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

A vacant imbecile expression. She refuses to speak even when told she is about to be removed to an asylum

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mrs Foster & J. Knowles just both inform me that she is imbecile, duty in her habits and unable to attend to her ordinary wants & that she formerly will not talk

Signed, *Name,* S. W. North

Place of Abode, 31 Castlegate York

Dated this 20th day of Sept One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Thomas Crowther,
being a (a) Doctor of Medicine, Licentiate of the Apothecaries Company, and a Member of the Royal College of Surgeons, London,
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Nineteenth day of September
at (c) Denholme Gate Mr Bingley
in the county of York separately from any other Medical Practitioner,
personally examined Martha Foster
of (d) New Road, Denholme, and that
the said Martha Foster
is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Her manner is gloomy and sullen, secludes herself from society. She has no fixed ideas about anything and in my opinion unable to hold any rational conversation: her manner and conduct is quite at variance with her usual habits.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her Mother states that she is occasionally very mischievous and destructive. Is very unclearly in her habits, such as refusing to wash herself or change her linens, and has become of late quite unmanageable at home.

Signed, *Name,* Thomas Crowther

Place of Abode, Luddenden

Dated this Nineteenth day of September One Thousand Eight Hundred and Sixty six.

No 1100.

Richard Henry Keymer

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Richard Henry Keymer whom I last saw at Cirencester on the 20th day of October 1866 (a) a (b) an idiot as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said ~~patient~~ Richard Henry Keymer

Signed, *Name,* Henry Keymer
Occupation (if any), Insurance agent
Place of Abode, 2 Pembroke terrace
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father to the patient

Dated this twenty ninth Day of October
One Thousand Eight Hundred and Sixty six

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Richard Henry Keymer
Sex and Age	male aged 34 years
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	no occupation
Religious persuasion, as far as known	of the Society of Friends
Previous Place of Abode	Norwich
Whether First Attack	yes
Age (if known) on First Attack	about 24 years old
When and where previously under Care and Treatment	at Norwich
Duration of existing Attack	since the above age
Supposed Cause	teething
Whether subject to Epilepsy	yes
Whether Suicidal	No. —
Whether Dangerous to others	No. —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No. —
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Henry Keymer 2 Pembroke terrace Cirencester

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Keymer
Occupation (if any), Insurance Agent
Place of Abode, 2 Pembroke terrace
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father to the patient

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Richard Smith being a (a) Member of the Royal College of Surgeons (London) and Licentiate of the Company of Apothecaries (London) and being in actual practice as a (b) Surgeon & Apothecary hereby certify that I, on the twenty ninth day of October 1866 at (c) No 2 Pembroke Terrace (Cirencester) in the County of Gloucester separately from any other Medical Practitioner, personally examined Richard Henry Keymer of (d) No 2 Pembroke Terrace Cirencester and that the said Richard Henry Keymer is a (e) an Idiot and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

from frequently seeing him in an Idiotic State not knowing me when attending any part of the Family

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* John Richard Smith
Place of Abode, Cirencester

Dated this twenty ninth day of October One Thousand Eight Hundred and Sixty Six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, David Rusk being a (a) Member of the Royal College of Surgeons (London) & Member of the Company of Apothecaries and being in actual practice as a (b) Surgeon & Apothecary hereby certify, that I on the twenty ninth day of October 1866 at (c) No 2 Pembroke Terrace (Cirencester) in the county of Gloucester separately from any other Medical Practitioner, personally examined Richard Henry Keymer of (d) No 2 Pembroke Terrace Cirencester and that the said Richard Henry Keymer is a (e) an Idiot and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) An idiotic countenance, a total want of mental powers ~~with~~ in conversation & want of power over his actions contorting his face, accompanied by Idiotic actions.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* David Rusk
Place of Abode, Cirencester

Dated this Twenty ninth day of October One Thousand Eight Hundred and Sixty six

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

He is a member of the Society of Friends by birthright

2. Where was the place of birth of the patient?

Norwich

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not for the first 2½ years of his life; frequent convulsions then occasioned congenital imbecility

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

He was always docile and easily managed, but from this age all mental power appeared to be destroyed.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

From the above age his faculties never opened & after the convulsions he lost the gift of speech

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

He has never been able to do anything for his living. Sir Charles Clarke M.D. told us, we could not hope he ever would.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

He has been incapable of the married state

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

He was never able to engage in intellectual or other pursuits

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Nothing of this kind has taken place

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

The convulsions were succeeded by epileptic fits to which he has ever since been subject

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

The convulsions referred to were believed to be caused by the suffering he had when teething.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No hereditary predisposition to insanity either on the fathers or mothers side.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

see the 3rd answer

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 2½ years —

15. What has been the duration of the present attack? Ever since

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The patient is not affected particularly by any circumstances. equally indifferent to all subjects

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Never was prone to any acts of destruction, or to violence of any kind, never attacked any creature. —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Never refuses food when he wants it, or shows any disposition to injure himself. —

23. What are the habits of the patient as regards personal cleanliness and decorum?

He is quite sensible to the calls of nature, but requires assistance as to the adjustment of his dress &c. —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

He is in good bodily health with the exception of the liability to fits.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

He has never been in any public or private asylum or hospital

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

When between 2 & 3 years old John Crosse a surgeon & Edwd. Ash M.D. then resident at Norwich, recommended mercury to be rubbed into his thighs, to relieve the convulsions but since his present malady was developed those whom we have consulted led us to regard it as incurable

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

we think the disorder about stationary, he does not get worse.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry Keymer, 2 Pembroke terrace, Cirencester

No 1101.

Lucia Bateson

Readmitted

Novr 29. 1866.

1102

Dec 17th 1866

Having examined and Bathed Alfred Lamb I find No Marks or Bruises or any singe of recent injury the Bodily condition good

Samuel Mines
Attendant.

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No 1102. Alfred Lamb

Birmingham Borough Lunatic Asylum.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

I, the undersigned, hereby request you to receive my Son Alfred Lamb whom I last saw at 45 Lee Crescent Edgbaston on the (a) 17th day of July One Thousand Eight Hundred and Sixty six a (b) person of unsound mind as a Patient into your Asylum. Subjoined is a Statement respecting the said Alfred Lamb

(a) Within one Month previous to the Date of the Order.

(b) Lunatic or Idiot, or a Person of unsound mind.

Signed, Name Joseph Lamb

Occupation (*if any*) Commercial Clerk

Place of Abode 45 Lee Crescent Edgbaston

Degree of Relationship (*if any*) or other circumstances of connection with the Patient . . . Father

Dated this Seventeenth day of July One Thousand Eight Hundred and Sixty 6

To the Medical Superintendent of the Lunatic Asylum for the Borough of Birmingham.

STATEMENT.

[*If any particulars in this Statement be not known, the fact to be so stated.*]

Name of Patient, with Christian Name at Length Alfred Lamb

Sex and Age 22. Male

Married, Single, or Widowed Single

Condition of Life, and previous Occupation (*if any*) Corn Dealer

Religious Persuasion, as far as known Member of the Society of Friends

Previous place of Abode (*before coming to Asylum*) 45 Lee Crescent Edgbaston

Whether First Attack Yes

Age (*if known*) on First Attack 22.

When and where previously under Care and Treatment Nowhere

Duration of existing Attack about a month

Supposed Cause not Known

Whether Subject to Epilepsy no

Whether Suicidal Has threatened to commit suicide if so allowed to leave the house

Whether Dangerous to others No

Whether found Lunatic by Inquisition, and Date of Commission, or order for Inquisition . . . . . No

Special circumstances (*if any*) preventing the Patient being Examined before Admission separately by two Medical Practitioners None

Name and Address of Relative to whom Notice of (*Discharge or*) Death to be sent . . . . . Joseph Lamb

(c) Where the Person signing the Statement is not the Person who signed the Order, the following particulars concerning the Person signing the Statement are to be added.

Signed, Name (c) Joseph Lamb

Occupation (*if any*) Commercial Clerk

Place of Abode 45 Lee Crescent Edgbaston Birmingham

Degree of Relationship (*if any*) or other circumstances of connection with the Patient . . . Father

MEDICAL CERTIFICATE.

I, the undersigned, being a (a) Doctor of Medicine & Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify, that I, on the Seventeenth day of July at (c) 45 Lee Crescent Birmingham in the County of Warwick separately from any other Medical Practitioner, personally examined (d) Alfred Lamb Corn Dealer, 45 Lee Crescent Birmingham and that the said Alfred Lamb is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

1st. Facts indicating Insanity observed by myself (f) He is low spirited, very irritable & constantly shifting his limbs. He says he wishes to go abroad but do is not know where, nor what he should do for a living, having no trade. He says he is obliged to walk about all night, he cannot lie in bed. He is incoherent in conversation

2nd. Other facts (if any) indicating Insanity communicated to me by others (g) Joel Lamb Son

His father states that He walked about all last night & would not be kept at home, that he threatened to cut his throat, that he has given away his money and all that he had

Signed, Name Alfred Hill M.D.

Place of Abode The Hollies Winson Green Birmingham

Dated this Seventeenth day of July

One Thousand Eight Hundred and Sixty six

SECOND MEDICAL CERTIFICATE.

I, the undersigned, being a (a) Doctor of Medicine & Licentiate of Apothecaries Co and being in actual practice as a (b) Surgeon hereby certify, that I, on the 17th day of July at (c) 45 Lee Crescent Birmingham in the County of Warwick separately from any other Medical Practitioner, personally examined (d) Alfred Lamb Corn Dealer 45 Lee Crescent Birmingham and that the said Alfred Lamb is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:

1st. Facts indicating Insanity observed by myself (f) A peculiar restlessness and staring of the eyes, a suspicious look, bursts out laughing suddenly when in conversation. Talks incoherently & crudely

2nd. Other facts (if any) indicating Insanity communicated to me by others (g) Joel Lamb Son Brother states that he will get up in middle of night & holds his hands over his brother, and threatens to pull the house down if restrained or opposed will not stop in the house after nine, but will then walk about all night

Signed, Name John D Scurrah M.D.

Place of Abode 114 Broad St

Dated this Seventeenth day of July

One Thousand Eight Hundred and Sixty six

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London.
(b) Physician, Surgeon, or Apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *A. B. of ——, insert residence and profession, or occupation, (if any.*
(e) Lunatic, *or* an Idiot, *or* a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Alfred Lamb

NOTICE OF ADMISSION.

I hereby give you Notice, That _____

was admitted into this Asylum as a Private Patient on the _____

day of _____ One Thousand Eight Hundred and Sixty _____

and I hereby transmit a Copy of the Order and Medical Certificates on which he was received.

Signed, _____

Clerk of the Borough Lunatic Asylum, Birmingham.

Dated this _____ day of _____

One Thousand Eight Hundred and Sixty _____

To the Commissioners in Lunacy.

Birmingham Boro' Lunatic Asylum
December 7. 1866

I hereby certify that the foregoing are correct copies of the order and medical certificates under which Alfred Lamb was admitted into this Asylum - and I also certify that the said Alfred Lamb is in a fit state of health to be transferred from hence to the York Retreat

Thos. Green
med Supt

FORM OF OBLIGATION.

TO THE COMMITTEE OF VISITORS OF THE BIRMINGHAM BOROUGH LUNATIC ASYLUM.

GENTLEMEN,

Upon your admitting _____ into the Birmingham Borough Lunatic Asylum as a Private Patient, _____ hereby bind and oblige _____ to pay in advance from _____ the Sum of _____ per week, fixed by you for the maintenance, care, and Medical treatment of the said _____; to remove h when required to do so by you after seven days' notice; to bury h in case of Death; to keep a proper stock of Wearing Apparel and necessaries, and to renew them if required to do so, or to pay for the same if provided at the expense of the Asylum; and generally to fulfil all obligations required by the regulations of your Asylum.

Signed, Name _____

Place of Abode _____

Signed, Name _____

Place of Abode _____

Dated this _____ day of _____ One Thousand Eight Hundred and Sixty ____

No 1102. Alfred Lamb

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 8th day of December 1866, of Alfred Lamb, a Private Patient in the Birmingham Borough Asylum, to the Retreat, York.

Given under our hands this 26th day of November in the year of Our Lord One Thousand Eight Hundred and Sixty Six

R W Hutmidge
John D Creaton
} Commissioners in Lunacy.

ORDER.

I,* Joseph Lamb the undersigned having Authority to discharge Alfred Lamb a Private Patient in the Birmingham Borough Asylum hereby order and direct that the said Alfred Lamb be removed therefrom to the Retreat, York.

Given under my hand this* 27th day of November in the year of Our Lord One Thousand Eight Hundred and Sixty Six

(Signed) Joseph Lamb

Place of Abode 45 Lee Crescent
Edgbaston, Birmingham

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

1000 5|66—3 & S
4751

251

No 1103.

Sarah Smith.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the place of birth of the patient?

Dubb Lane, Bingley - Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Ordinary disposition & abilities

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Governed at home from the age of 5 to 9 - from 9 to 16 at good Ladies seminaries - finishing at Cheadle in Manchester

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No particular occupation - very regular & temperate habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Not particularly - fond of Botany & History

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Family reverse 12 years ago

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Pleurisy

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Cannot be accounted for - supposed incapacity & religious melancholy

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

40

15. What has been the duration of the present attack?

4 months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No change

19. What were the first decided symptoms of mental aberration?

Great depression & inactivity

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

a constant murmur of incapacity - want of management & calculations & not able to manage domestic & every day matters - also her previous religion being supposed a form

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

None

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

None

23. What are the habits of the patient as regards personal cleanliness and decorum?

Particular

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

As good as usual - Chest rather weak.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

None

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

A companion & out door exercise - no effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary - no change observable except when excited

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Smith
+
Jno. Wm. Smith
Eagle Works
Keighley
Yorkshire

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Smith

whom I last saw at North Bank, Ripon, Yorkshire,

on the Thirteenth day of December 1866. (a)

a (b) person of unsound mind as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Sarah Smith

Signed, *Name,* ~~Sarah Smith~~ John Smith

Occupation (if any), None.

Place of Abode, North Bank, Ripon, Yorkshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father ~~Brother~~

Dated this Thirteenth Day of December

One Thousand Eight Hundred and Sixty Six

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient; with Christian Name at length	Sarah Smith
Sex and Age	Female - Forty
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Circumstances reduced - no occupation
Religious persuasion, as far as known	Independent denomination - (member)
Previous Place of Abode	Morton n. Bingley - Yorkshire
Whether First Attack	First
Age (if known) on First Attack	Forty
When and where previously under Care and Treatment	No where
Duration of existing Attack	Four months
Supposed Cause	Change of life - otherwise unaccountable
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent.	Jno Wm Smith Eagle Works Keighley Yorkshire

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Jno Wm Smith

Occupation (if any), Iron Founder

Place of Abode, Keighley. Yorkshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient -

Brother

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Wm. Pa Paley.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Physicians London & a Graduate in Medicine of Edinburgh

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Physician

hereby certify that I, on the thirteenth day of December

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) North Bank Ripon

in the County of York separately from any other Medical Practitioner,

personally examined Sarah Smith

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) North Bank Ripon – Spinster and that

the said Sarah Smith

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f). Answers persistently in refusing to answer questions; together with considerable despondency & otherwise to be accounted for = & great reluctance at night.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) A tendency to solitary words by the Relations & questions as to ~~which~~ what would be the easiest mode of death – from the Wife Sarah Smith & her Brother

Signed, *Name,* Wm Pa Paley. M.D.

Place of Abode, Ripon

Dated this thirteenth day of December One Thousand Eight Hundred and Sixty 6.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Robt M. Bowman

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Surgeon Member of the Royal College of Surgeons

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify, that I on the thirteenth day of December 1866.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) North Bank Ripon

in the county of – separately from any other Medical Practitioner,

personally examined Wife Sarah Smith

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) North Bank Ripon and that

the said Sarah Smith

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Believes herself in – capable of performing her accustomed duties great difficulty in obtaining answers to questions

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Great depression & Tears & despondency as intended the closing. from Wife Sarah Smith & her brother

X Name of informant.

Signed, *Name,* Robt M. Bowman

Place of Abode, North St Ripon

Dated this thirteenth day of December One Thousand Eight Hundred and Sixty six.

No 1104.

John G. Appleton.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A member by convincement about forty years ago.

2. Where was the place of birth of the patient?

Deptford.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No exact information.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

We have reason to believe he was of an active, earnest mind & keenly sensitive — not aware of any natural precocity —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

A liberal education was received at boarding-schools —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Educated to the Medical profession & temperate and industrious habits during youth —

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 26 yrs of age — eleven children, eldest 38 yrs of age — youngest 19 yrs of age —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Nothing very particular has engaged his attention —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

His want of success in practice has of late been a source of disappointment to him —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

His Mother was a nervous, anxious woman and his father of a violent & excitable temper —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

It is difficult to say what have been the causes of the attacks of mental disorder. They appear to be rather of a moral nature, as family concerns, or the anxious care in his practice, or some over excitement —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

About two weeks —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? The malady has occurred regularly for many years but late attacks have been much more serious & of longer continuance; they generally last six weeks or two months commencing with violent excitement which in the course of a few days passes into melancholy to be again followed by excitement.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

The mind appears quite to recover itself between the attacks, tho' of late not so completely as in former years; the interval varies in duration from one to six months —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

The spirits are considerably elevated, and the temper at times very violent at the commencement of an attack; and whatever the patient has to do is done in great hurry, earnestness & excitement — Suffers from want of sleep and appetite

19. What were the first decided symptoms of mental aberration?

Extreme irritability and dislike to his wife and generally those around him —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

By recurring fits of excitement & melancholy followed by a greater or less interval of sanity — and the mind is affected indifferently by various subjects — No permanent but various delusions — A strong impression of being robbed of his goods —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

He is at times violent —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

Not so particular as usual —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder does gradually increase — During the past twelve months the longest of the lucid intervals has been between two & three months — In former years there have existed lucid intervals of from three to six months.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Eliza Appleton Wellington Street Luton

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Grigg Appleton whom I last saw at his own house Luton Beds on the 15th day of 1st Month 1867 (*) a (*) A person of unsound Mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said John Grigg Appleton

Signed, *Name,* Eliza Appleton
Occupation (if any),
Place of Abode, Luton Beds
Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this 15th Day of 1st month 1867
One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Grigg Appleton
Sex and Age	Male 64 yrs of age
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Medical man
Religious persuasion, as far as known	Friend
Previous Place of Abode	Luton
Whether First Attack	No
Age (if known) on First Attack	Not known
When and where previously under Care and Treatment	No where
Duration of existing Attack	Two weeks
Supposed Cause	Not known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	Not generally
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Eliza Appleton. Wellington Street. Luton.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Eliza Appleton
Occupation (if any),
Place of Abode, Luton
Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Dinne being a (a) Fellow of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the fourteenth day of January 1867 at (c) 47 Wellington Street – Luton in the County of Bedfordshire separately from any other Medical Practitioner, personally examined John Grigg appleton of (d) 47 Wellington Street – Luton – apothecary and that the said John Grigg appleton is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) (with intervenes in conversation) That he is in a state of Mental Depression consequent upon an attack of Recurrent Mania – combined with Incipient General Paralysis.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) That he has used great violence towards his servants and often places his family in a state of terror by his threatening conduct – communicated to me by Mrs Appleton.

Signed, *Name,* Wm Dinne

Place of Abode, Stotfold – Beds.

Dated this fourteenth day of January One Thousand Eight Hundred and Sixty seven

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Peter Dowson being a (a) Member of the Royal College of Surgeons, England and Licentiate of the Apothecaries Company London and being in actual practice as a (b) Surgeon and Apothecary hereby certify, that I on the fifteenth day of January 1867 at (c) 47 Brampton Street Luton in the county of Bedford separately from any other Medical Practitioner, personally examined John Grigg Appleton of (d) 47 Brampton Street Luton Apothecary and that the said John Grigg Appleton is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Recent mania great excitement of mind, frequent sensations, and broken incoherent talking after violent restlessness, – he knows not what he says or does – He is dull moody and often violent – I think it due to his wife

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Violent behaviour to wife about home – a man of great substance, Friends do become very alarmed for their safety – Breaking the doors and other things – Information received from Mrs Appleton and corroborated by her Husband Mr Appleton

Signed, *Name,* Peter Dowson

Place of Abode, Luton Beds

Dated this fifteenth day of January One Thousand Eight Hundred and Sixty seven

"In sufficient – some facts in declaring Insanity observed by Mr Dinne, at the time of the examination must be stated"

No 1105.

Mary Ann Parkinson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Ann Parkinson

whom I last saw at Lawrence House, York

on the First day of February (*)

a (Lunatic as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Mary Ann Parkinson.

Signed, *Name,* Geo Wostenholm

Occupation (if any), Manufacturer

Place of Abode, Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Trustee

Dated this First Day of February

One Thousand Eight Hundred and Sixty Seven.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Ann Parkinson.
Sex and Age	Female - aged about 50 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	A Lady.
Religious persuasion, as far as known	Independent
Previous Place of Abode	Sheffield.
Whether First Attack	No.
Age (if known) on First Attack	about 25 years.
When and where previously under Care and Treatment	Darnick Hall & Lawrence House
Duration of existing Attack	Over two years.
Supposed Cause	Disappointed affections.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Geo Wostenholm Sheffield

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (*) Geo Wostenholm

Occupation (if any), Manufacturer

Place of Abode, Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Trustee

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the fifth day of February 1867
at (c) Lawrence House Lawrence Street York
in the County of York separately from any other Medical Practitioner,
personally examined Mary Ann Parkinson Single woman
of (d) Victoria park Sheffield. now of Lawrence House York and that
the said Mary Ann Parkinson
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) A very insane expression of countenance. she obstinately refuses to speak even when told the object of my visit. her whole appearance is that of a person the subject of Mania

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mrs Pumphrey informs me that she is almost invariably silent and can only be got to speak at times that she occasionally refuses food and is very untidy in her person — Mrs Pumphrey further informs me that she has no doubt Mr Parkinson understood the questions put to her & that her tantrumity was no more than she usually manifests.

Signed, *Name,* S W North
Place of Abode, 31 Castlegate York

Dated this 5th day of February One Thousand Eight Hundred and Sixty seven

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the sixth day of February 1867
at (c) Lawrence House, Lawrence St - York
in the county of York separately from any other Medical Practitioner,
personally examined Mary Ann Parkinson
of (d) Victoria Park Sheffield - now of Lawrence House York and that
the said Mary Ann Parkinson
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She has a stolid expression of countenance, keeps her eyes closed & refuses to answer any question or to speak

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mr Pumphry informs me that is her usual condition

Signed, *Name,* William Procter
Place of Abode, 24 Petergate - York

Dated this sixth day of February One Thousand Eight Hundred and Sixty seven -

Friday July 8th

Received Miss Parkinson
found her free from bruises
two marks only which
gave one to think they
might have been gatherings
or instruments used having
a sort of drawn appearance
legs and feet much
swollen little settled
after the bath

L. Akers

No. 1106. Mary Ann Seomans.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Germans
16 Bank Street
Sheffield.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Ann Yeomans

whom I last saw at Southport

on the First day of February 1867 (a)

a (b) Lunatic as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Mary Ann Yeomans

Signed, *Name,* John Yeomans

Occupation (if any), Solicitor

Place of Abode, Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Twelfth Day of February

One Thousand Eight Hundred and Sixty seven.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Ann Yeomans
Sex and Age	Female, aged about 45
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Schoolmistress
Religious persuasion, as far as known	of the Society of Friends
Previous Place of Abode	Southport
Whether First Attack	no
Age (if known) on First Attack	about 28
When and where previously under Care and Treatment	Dr Darnall Hall near Sheffield, Mr Pose Osbaldwick near York
Duration of existing Attack	Three months
Supposed Cause	unknown
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	at times
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	no
Name and Address of Relative to whom Notice of Death to be sent.	John Yeomans Solicitor 16 Bank Street Sheffield

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) John Yeomans

Occupation (if any), Solicitor

Place of Abode, Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the thirteenth day of February
at (c) the House of Mrs Jose Osbaldwick in York
in the County of York separately from any other Medical Practitioner,
personally examined Mary Ann Yeomans Single Woman
of (d) 7 Seabank View Southport and that
the said Mary Ann Yeomans School Mistress
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is violent & incoherent - says that her name is Hyena, which animal is her father

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Procter
Place of Abode, 24 Petergate - York
Dated this thirteenth day of February One Thousand Eight Hundred and Sixty seven -

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 13th day of February
at (c) the House of Mrs Jose Osbaldwick in York
in the county of York separately from any other Medical Practitioner,
personally examined Mary Ann Yeomans - Schoolmistress, Single Woman
of (d) 7 Seabank View Southport and that
the said Mary Ann Yeomans
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Rambling incoherent conversation - a very wild expression of countenance

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York
Dated this 13th day of February One Thousand Eight Hundred and Sixty seven

No 1107.

Eliza Payne.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Member by birthright

2. Where was the place of birth of the patient?

At Wellingtonugh

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Disposition & character Mirth, Youthful Innocent & Natural, No remarkable peculiarity or eccentricity & Spontaneity;

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Instructed at a Girls School in Wellingtonugh from 8 to 12 years of age & then went to Ackworth for two years

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Was a Nurse Maid & Servant two years, & then kept a day School for young Children till last Saturday - Her conduct temperate, and regular during youth.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? He usually religious matters, reading the Bible -

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No -

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Unknown

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? forty three years of age.

15. What has been the duration of the present attack? Three months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? during the last two years, has been occasionally very eccentric, having delusions of different kinds, being violent in manner and incoherent in language -

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Has complete lucid intervals for some months together

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
occasionally very irritable, was depressed in spirits.
Sleep good, health generally good -

19. What were the first decided symptoms of mental aberration?
peculiar odd manner -

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Violent manner & incoherent language - chiefly by Religion -
Considering all her friends her enemies -

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? - yes, but has not attempted to destroy life

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No -

23. What are the habits of the patient as regards personal cleanliness and decorum?
perfectly cleanly & decorous -

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
yes -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
No Medical means have been used & never been under any particular restraint.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing lately, more in the last few weeks -

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Northampton & Wellingborough Monthly Meeting:
Fred. J. Longman Wellingborough Clerk to the Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Eliza Payne

whom I last saw at Wellingtonough

on the thirteenth day of February 1867 (*)

a (*) Lunatic as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Eliza Payne

Signed, *Name,* Thomas Payne

Occupation (if any), Commercial Traveler

Place of Abode, George Street Balsall Heath Birmingham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 13th Day of second Month 1867

One Thousand Eight Hundred and Sixty 7

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Eliza Payne
Sex and Age	Female, forty five years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	School Mistress.
Religious persuasion, as far as known	Member of Society of Friends —
Previous Place of Abode	Wellingtonough.
Whether First Attack	No.
Age (if known) on First Attack	forty three years.
When and where previously under Care and Treatment	None —
Duration of existing Attack	Three months
Supposed Cause	Unknown.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Elizabeth Payne, Oxford St. Wellingtonough

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Thomas Payne

Occupation (if any), Commercial Traveler

Place of Abode, George Street Balsall Heath Birmingham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Clark
being a (a) Fellow of the Royal College of Surgeons. London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Tenth day of February 1867
at (c) Oxford St. Wellingborough
in the County of Northampton separately from any other Medical Practitioner,
personally examined Eliza Payne
of (d) Oxford St. Wellingborough – School Mistress and that
the said Eliza Payne
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Violent manner and incoherent language
believing Persons came to injure or destroy her.
and that she was bewitched.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Incoherent manner at the Meeting House.
Frederic John Longman

Signed, Name, Thomas Clark
Place of Abode, Wellingborough

Dated this thirteenth day of February One Thousand Eight
Hundred and Sixty seven

X number of Street
X Do
X name of informant

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, George Charles Sharman
being a (a) Member of the Royal College of Surgeons of London,
and Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon and Apothecary
hereby certify, that I on the thirteenth day of February – 1867.
at (c) Oxford Street – Wellingborough
in the county of Northampton separately from any other Medical Practitioner,
personally examined Eliza Payne
of (d) Oxford Street – Wellingborough – School mistress and that
the said Eliza Payne
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Irritability of temper, violence of manner, a suspicion that people are conspiring to take away her life by shooting or by poison – Religious delusions –

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) – the above, with general incoherence in language, and violence in manner, particularly towards relations & old friends.

Signed, Name, George Charles Sharman
Place of Abode, Wellingborough

Dated this 13th day of February One Thousand Eight
Hundred and Sixty seven

House not numbered
G. C. S. X
X Do
X name of informant
Mother, Brother and friends
G. C. S.

No. 1108.

Wm. Sturge Cotterell.

NOTICE OF ADMISSION.

To be transmitted within one clear day *from the day of the Patient's Reception.*

I hereby give you Notice, That

(a) House or hospital.

was admitted into this (a) as a Private Patient, on the Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b)

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed,_____

(c) Superintendent or proprietor of——

(c) *Proprietor and Superintendent of Northwoods.*

Dated this Day of One Thousand Eight Hundred and Sixty-

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict., c. 96, schod. C. s. 24.)
25 & 26 Vict., c. 111.)
Private Patient.

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ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. A. No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive W S Cotterell whom I last saw at Lyncombe Villa Redland Bristol on the eighteenth day of February 1867 (a) a (b) person of unsound mind, as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said

Signed, *Name,* Emma Reed Cotterell

Occupation (if any), _____

Place of Abode, Lyncombe Villa Redland Bristol

Degree of the Relationship (if any) or other circumstances of connexion with the Patient. Wife

Dated this eighteenth Day of February One Thousand Eight Hundred and Sixty Seven

To Dr J G Davey

(c) *Proprietor and Superintendent of* (d) *Northwoods.*

(c) Proprietor or superintendent of ——
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any particulars in this Statement be not known, the fact to be so stated.

Name of Patient, with Christian Name at length	William Sturge Cotterell
Sex and Age	M 45
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	Commercial traveller
Religious Persuasion, as far as known.	Church
Previous Place of Abode	Lyncombe Villa Redland Bristol
Whether First Attack	Second attack
Age (if known) on First Attack	44
When and where previously under Care and Treatment	Northwoods Asylum
Duration of existing Attack	about 3 days
Supposed Cause	not known
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately, by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	J H Cotterell Bradley villa Bath

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name* (e) J Francis Cotterell

Occupation (if any), Soda Water Manufacturer

Place of Abode, 6 Pierrepont St Bath

Degree of Relationship (if any) or other circumstances of connexion with the Patient. Brother

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any,) of the patient.*

(e) Lunatic or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information and from whom.*

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, George Nicklethwaite Stansfield being a (a) Member of the Royal College of Surgeons England & Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon & Accoucheur 1867 hereby certify, that I, on the eighteenth day of February at (c) Lyncomb Villa Redland Bristol in the County of Gloster separately from any other Medical Practitioner, personally examined William Sturge Cotterell of (d) Lyncomb Villa Commercial Travellor and that the said William Sturge Cotterell is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself (f) From his personal appearance & from his incoherent & wandering Conversation he is constantly labouring under the impression that he possesses great wealth & is able to translate various languages &c & considers himself a great artist—

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Geo N Stansfield

Place of Abode, 8 Burlington Rd Redland

Dated this 18th day of February One Thousand Eight Hundred and Sixty seven

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Ralph M Bernard being a (a) Fellow of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify, that I, on the eighteenth day of February 1867 at (c) Lyncomb Villa Redland in the County of Gloucester separately from any other Medical Practitioner, personally examined William Sturge Cotterell of (d) Lyncomb Villa Redland and that the said William Sturge Cotterell is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz. :—

1. Facts indicating Insanity observed by myself (f) He supposes he has been offered to be made Superintendent of the Wells Cobstabulary at £200 per annum whom he was confined as a prisoner. He states he intends opening business in Bristol London & Plymouth & at returns he will in a year be immensely rich & other such like manner

2. Other facts (if any) indicating Insanity communicated to me by others (g) His brother J Francis Cotterell states as that when he went to Wells to ~~to~~ bring him home ~~to~~ his head he was quite ignorant of the road &c & many other marks of want of recollection

Signed, *Name,* Ralph M Bernard

Place of Abode, 5 Victoria Square Clifton

Dated this eighteenth day of February One Thousand Eight Hundred and Sixty seven

J Francis Cotterell

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No 1108
Wm. S. Cotterell.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 16th day of March 1867, of William Sturge Cotterell a Private Patient in Northwoods House, near Bristol, to the Retreat, York.

Given under our hands this 23rd day of February in the year of Our Lord One Thousand Eight Hundred and Sixty Seven

John D Craton
R W S Lutwidge
} Commissioners in Lunacy.

ORDER.

I,* Emma Reed Cotterell the undersigned having Authority to discharge William Sturge Cotterell a Private Patient in Northwoods House, near Bristol hereby order and direct that the said William Sturge Cotterell be removed therefrom to the Retreat, York. ~~House~~

Mrs Cotterell (the wife) must make the necessary insertion & sign this

Given under my hand this* 25 day of Feby in the year of Our Lord One Thousand Eight Hundred and Sixty Seven

(Signed) Emma Reed Cotterell

Place of Abode Lyncombe Villa
Redland Bristol

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients – The Committee of the Person.

1000 3 | 06—H & S
1704

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12-25

No 1109.

BETHNALL HOUSE.

NOTICE OF ADMISSION.

Wm Holmes.

Sched. (C.)—Sec. 24.

I hereby give you Notice, That _____

_____

was admitted into this House as a Private Patient, on the _____

day of _____ 186 , and I hereby transmit a Copy of the Order and Medical Certificate on which he was received (a)

(a) If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.

Signed, _____

Medical Officer of Bethnall House Asylum.

Dated this _____ day of _____

One Thousand Eight Hundred and Sixty-

To the Commissioners in Lunacy.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

16 & 17 Vict., c. 96, Sched. (A) No. 1, Sects. 4, 8; and 25 & 26 Vict., c. 111, Sects. 2, 3.

I, the undersigned, hereby request you to receive William Holmes of Alton Hants whom I last saw at Fulford on the sixth day of 3rd Month 1867 (a) a (b) person of unsound mind as a Patient into your House.

(a) The patient must be seen by the person signing the order within one month previous to the date of it.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Wm Holmes

Signed, *Name* Charles Mansergh

Occupation (if any) Ironmonger

Place of abode Regate Surry

Degree of relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Dated this sixth day of third month One Thousand Eight Hundred and Sixty-seventh

MESSRS. WARBURTON & Co.,
Proprietors of Bethnall House Asylum.

STATEMENT.

If any Particulars in this Statement be not known, the fact to be so stated.

Name of Patient, with Christian Name at length	William Holmes
Sex and Age	Male 62
Married, Single, or Widowed	Single —
Condition of Life, and previous Occupation (if any)	Gentleman. Linen draper
The Religious Persuasion, as far as known	— Friend
Previous Place of Abode	— Alton Hants
Whether First Attack	— Yes —
Age (if known) on First Attack	— Sixty-Two (Barnay Rugate)
When and Where previously under Care and Treatment	— (Nowhere)
Duration of existing Attack	One months
Supposed Cause	Bodily weakness
Any Relation afflicted with Insanity, if so, state relationship	an Uncle
Whether subject to Epilepsy	no
Whether Suicidal	— no doutful
Whether dangerous to others	— ditto sometimes violent
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No at times —
Special circumstances (if any) preventing the Patient being examined before Admission, separately, by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death is to be sent	Francis Imay, Regate

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, *Name (c)* Charles Mansergh

Occupation (if any) Ironmonger

Place of Abode Regate

Degree of Relationship (if any) or other circumstances of connexion with the Patient brother in Law

Any person receiving a per centage, or otherwise interested in the payments to be made by or on account of any Patient received into a Licensed or other House, is prohibited from signing any Certificate or Order for the reception of such Patient.

N.B.—Medical Certificates of Patients' Examination, and the Signatures, must be dated WITHIN SEVEN CLEAR DAYS of the Patients' reception.

The Medical Men signing the Certificates must not be in Partnership, nor one an Assistant to the other.

MEDICAL CERTIFICATE.

16 & 17 Vict., chap. 96. Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Insert Christian and Surname at full length.*

(b) *Here state qualification, if a graduate, licentiate, or member, &c., and of what body.*

(c) *Physician, surgeon, or apothecary, as the case may be.*

(d) *Here insert the full address of the place at which the examination is made, not forgetting the number (if any) of the house.*

(e) *Here insert the residence of the patient in full.*

(f) *Here insert the occupation of the patient.*

(g) *Lunatic, or an idiot, or person of unsound mind.*

I, the undersigned, (a) Jonathan Hutchinson being a (b) Fellow of the Royal College of Surgeons and being in actual practice as a (c) Surgeon hereby Certify, that I, on the fifth day of March One Thousand Eight Hundred and Sixty-seven at (d) Ampfields Hotel South Place Finsbury in the County of Middlesex separately from any other Medical Practitioner, personally examined William Holmes of (e) Alton, Hants (f) Gentleman and that the said William Holmes is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

(h) *Here state the facts observed ON THE DAY OF EXAMINATION.*

[*The facts stated here should be such as will satisfy any one reading them that the person to whom they refer must be of unsound mind.*]

1. Facts indicating Insanity observed by myself (h)

He believes that he is in the special power of the Devil. He at times believes that he has already passed into another world & is irrevocably lost. He expressed to me an amount of despondency far beyond what any facts he could mention warranted

(i) *Here state the information, FROM WHOM, and WHEN received.*

2. Other facts (if any) indicating Insanity communicated to me by others (i) He has ~~for~~ had two attacks during which he became violent & did not know where he was or who was with him He has expressed his fear that he should commit suicide

From Joseph Marriage March 4 '67

Signed, *Name* Jonathan Hutchinson

Place of Abode 4 Finsbury Circus

Dated this fifth day of March One Thousand Eight Hundred and Sixty-seven

The Medical Man Certifying should pay particular attention to the marginal directions, for however unimportant they may appear, if they are not strictly attended to, the Certificate is worthless.

Any person receiving a per centage, or otherwise interested in the payments to be made by or on account of any Patient received into a Licensed or other House, is prohibited from signing any Certificate or Order for the reception of such Patient.

N.B.—Medical Certificates of Patients' Examination, and the Signatures, must be dated WITHIN SEVEN CLEAR DAYS of the Patients' reception.

The Medical Men signing the Certificates must not be in Partnership, nor one an Assistant to the other.

MEDICAL CERTIFICATE.

16 & 17 Vict., chap. 96. Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Insert Christian and Surname at full length.

(b) Here state qualification, if a graduate, licentiate, or member, &c., and of what body.

(c) Physician, surgeon, or apothecary, as the case may be.

(d) Here insert the full address of the place at which the examination is is made, not forgetting the number (if any) of the house.

(e) Here insert the residence of the patient in full.

(f) Here insert the occupation of the patient.

(g) Lunatic, or an idiot, or person of unsound mind.

I, the undersigned, (a) John Millar Edn
being a (b) Licentiate of the Royal College of Physicians Edinburgh
and being in actual practice as a (c) Physician
hereby Certify, that I, on the 4th day of March
One Thousand Eight Hundred and Sixty-Seven at (d)
1 South place Finsbury
in the County of Middlesex separately from any other Medical Practitioner, personally examined William Holmes
of (e) Alton
(f) Gentleman
and that the said William Holmes
is a (g) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

(h) Here state the facts observed ON THE DAY OF EXAMINATION.

[The facts stated here should be such as will satisfy any one reading them that the person to whom they refer must be of unsound mind.]

1. Facts indicating Insanity observed by myself (h) he believes that the Devil has got hold of him & that his soul is lost, he has also he says contemplated suicide

(i) Here state the information FROM WHOM, *and* WHEN *received.*

2. Other facts (if any) indicating Insanity communicated to me by others (i)

Signed, *Name* Jno Millar
Place of Abode Bethnall House

Dated this 5th day of March
One Thousand Eight Hundred and Sixty-7

The Medical Man Certifying should pay particular attention to the marginal directions, for however unimportant they may appear, if they are not strictly attended to, the Certificate is worthless.

No 1110.

Mary Richardson Sharp.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership by birthright—

2. Where was the place of birth of the patient?

Darlington—

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Timidity and starting in sleep

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Gentle & amiable — no marked peculiarity — average natural understanding — no precocity —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

The understanding & affections received healthy cultivating — education partly at home, the rest at the Establishment of the Misses J & C Procter, Polam School, Darlington —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Trained at home on leaving school, to habits of industry — temperate regular conduct exemplified in every instance — the Patient was for both Mothers housekeeper & discharged her duties efficiently —

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Fever some years ago — a few weeks since suffered a paroxysm affection of the Bowels — but the most noteworthy feature is a habit she had both when a child & might frightful sometimes occurring midnight screaming & leaving her bed but not her room — a light sleeping with other persons — recommend the intervals of fright were sometimes —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Presume in a limited room, followed by a shock
Some threat of frenzic symptoms preceded the attack —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

In her 28th year

15. What has been the duration of the present attack?

Almost a week

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Her answer to 16-

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

A short time previous to the attack she was on a visit from home for 5 weeks but her friends take nothing whatever to mind indication of any mental disturbance

19. What were the first decided symptoms of mental aberration?

Tearing a testament in two - when spoken to by a near relative making no reply - Endeavours to check crying up. Violently resisting any attempt to prevent it -

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Ghosts Devils "Evil Spirits" - Dreadful Screams - Delusions of mutual bitterness of Enmity & a false Cousin & Mean power supernatural power -

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Possibly if actively restrained

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Food partially refused at times -

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Feverishness with foul tongue & retention of urine - restlessness & continuous talking singing & repeating nonsensical jingling Rhymes by the hour together -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

First attack

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Two Medical practitioners have been consulted but little medicine has been given -

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears deepening - the lucid intervals are partial only but all the senses are nearly alive & in power - With increase or decrease of Feverishness comes an increase ~~a decrease~~ of mental wandering -

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Isaac Sharp
Darnford
Macclesfield

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Richardson Sharp

whom I last saw at 33 Dickinson Square

on the 11th day of 3rd Month 1867 (a)

a (b) person of unsound mind as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Mary Richardson Sharp

Signed, *Name,* Isaac Sharp

Occupation (if any), Land Agent

Place of Abode, Middlesbro on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father of the Patient

Dated this 11th ~~day~~ Day of 3rd Month (March)

One Thousand Eight Hundred and Sixty seven

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Richardson Sharp
Sex and Age	Female 28
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lived with her father
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	Middlesbro (at Shields on a visit)
Whether First Attack	First attack
Age (if known) on First Attack	28
When and where previously under Care and Treatment	First attack
Duration of existing Attack	about a week
Supposed Cause	Exciting cause – Chill sore throat & feverishness –
Whether subject to Epilepsy	No
Whether Suicidal	Requires watching & restraint when needful
Whether Dangerous to others	Probably if without watching & restraint –
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent.	Isaac Sharp Dairy Knoll Middlesbro

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Isaac Sharp

Occupation (if any), Land Agent

Place of Abode, Middlesbro

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father of the patient –

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

Qualification

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Robert Septimus Peart being a (a) ~~General Medical Practitioner~~ Doctor of (Med) Medicine (Dr. Medicine) M.R.C.S. London L.S.A. London and being in actual practice as a (b) General Medicine Practitioner hereby certify that I, on the 11th day of March at (c) No 33 Dockwray Square North Shields in the County of Northumberland separately from any other Medical Practitioner, personally examined Mary Richardson Sharp of (d) Dairy Knoll near Middlesbro and that the said Mary Richardson Sharp is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Incoherence of speech violence towards attendants - ~~[illegible]~~ Calling persons the devils - believing herself under a spell

(g) Here state the information, and from whom.

Name of Informant

2. Other facts (if any) indicating Insanity communicated to me by others (g) said to be dangerous both to herself and others from sudden violence by the nurse Elizabeth Waller

Signed, Name, Robert S. Peart M.D.R.
Place of Abode, North Shields

Dated this 11th day of March One Thousand Eight Hundred and Sixty seven

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John B Bramwell being a (a) M.D. Edin. and Member of the Royal College of Surgeons of London and being in actual practice as a (b) Surgeon & general practitioner of Medicine hereby certify, that I on the Eleventh day of March 1867 at (c) 33 Dockwray Square North Shields in the county of Northumberland separately from any other Medical Practitioner, personally examined Mary Richardson Sharp of (d) Dairy Knoll near Middlesborough and that the said Mary Richardson Sharp is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Because she perpetually raves & talks, asserting that she is mermerised that I am an archangel - & that ~~[illegible]~~ the person she possesses and because she threw a tumbler violently at me

(g) Here state the information, and from whom.

Name of Informant

2. Other facts (if any) indicating Insanity communicated to me by others (g) That she has attempted to throw herself out of the window, & requires constant restraint to prevent her injuring either herself or others - Information derived from Elizabeth Waller and Mr Hand Sharp

Signed, Name, J B Bramwell
Place of Abode, Dockwray Square North Shields

Dated this Eleventh day of March One Thousand Eight Hundred and Sixty seven

Mary Sharpe arrived on the 12th
March and was bathed according
to the Rules in the Bath Room and
I found her free from all
bruises & other injuries

A Clarkson

270

No 1111.

Maria Candler.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is ~~he~~ (or she) in any way connected with the Society of Friends?

Born in membership and remains a member

2. Where was the place of birth of the patient?

Chelmsford

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing whatever

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Of good disposition and character, without eccentricity or peculiarity, and of good common understanding

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

The understanding and affections of the patient were well cultivated in early life under tender parents, who had her well taught by a compitent tutor at their own home in the several branches of common school learning.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

She occasionally assisted in her fathers shop and was always industrious and temperate and of regular conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married to John Candler in the year 1814 when twenty three years of age but has had no children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has ~~his~~ her conduct ever exhibited a strong bias in any direction?

It is believed not

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Nothing out of the common way

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The present attack is the first of its kind, and without any traceable cause

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

At the age of seventy four ~~(74)~~ five

15. What has been the duration of the present attack?

Several weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

See answer to No. 13

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

This is the first attack.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing unusual of a previous character remembered.

19. What were the first decided symptoms of mental aberration?

Loss of memory, and incoherence of thought and expression.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

No one subject in particular occupies her thoughts, except this that everything goes wrong, and that she is shamefully treated. No one seems to have influence over her but her husband, and he but little, as she often says that he is not her husband: she addresses them as uncle, friend or brother? Restless day and night.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She took a poker one morning with her into the Green house, when under great excitement, as seeming to intend mischief.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She has shewn no disposition to injure herself, nor does she refuse food, but refuses to take medicine except under strong compulsion

23. What are the habits of the patient as regards personal cleanliness and decorum?

Not to be complained of in any way. Her attendant washes her, but seldom succeeds in doing this, or in dressing her, without resistance and screaming

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never under any other care than at ~~home~~ her own home, and lately with a judicious nurse-attendant of some experience

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

She has taken sedatives, and has a nurse-attendant constantly to wait upon her.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing, but with lucid intervals, and attended at times (no particular times or stated periods) with somewhat violent excitement, ~~&c~~ with the use of bitter language to her attendant.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Candler, her husband, near Chelmsford

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Maria Candler whom I last saw at Oak Tree Cottage, near Chelmsford, on the Second day of Fourth month, (April,) (*) a person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Maria Candler.

Signed, *Name,* John Candler
Occupation (if any), No occupation.
Place of Abode, Oak Tree Cottage, Chelmsford
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this Second Day of Fourth month, (April)
One Thousand Eight Hundred and Sixty Seven.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Maria Candler
Sex and Age	Female. aged seventy five years.
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	In easy circumstances.
Religious persuasion, as far as known	Society of Friends.
Previous Place of Abode	Chelmsford.
Whether First Attack	First attack.
Age (if known) on First Attack	Seventy ~~four~~ Five.
When and where previously under Care and Treatment	Never previously under care.
Duration of existing Attack	Two or three months.
Supposed Cause	Unknown.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent.	John Candler near Chelmsford

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) John Candler
Occupation (if any), None
Place of Abode, ~~Near~~ Springfield, Essex
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Oswald Copland being a (a) Member of the Royal College of Surgeons of England and a registered practitioner of Medicine and being in actual practice as a (b) Surgeon hereby certify that I, on the thirtieth day of March 1867 at (c) Springfield at Oak Tree Cottage in the County of Essex separately from any other Medical Practitioner, personally examined Maria Candler of (d) Springfield wife of John Candler of no occupation and that the said Maria Candler of Oak Tree Cottage Springfield in the County of Essex is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) perfectly incoherent, fails to recognize me although she has known me forty years and more, begins sentences which she cannot finish; on one occasion she was very violent to me, making use of abusive language, which is totally foreign to her usual character.

2. Other facts (if any) indicating Insanity communicated to me by others (g) great restlessness refuses to be undressed, or to go to bed; in the night is constantly getting up, wanting to go home as she supposes it to be time; believes she sees people, this her husband and her attendant Charlotte Green.

John Candler

Signed, *Name,* Oswald Copland

Place of Abode, Chelmsford

Dated this thirtieth day of March One Thousand Eight Hundred and Sixty seven.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Daniel Wheeler of Surgeon England & Scientific of the being a (a) Member of the Royal College of Surgeons England & Licentiate of the Apothecaries Company & Lincton and being in actual practice as a (b) Surgeon hereby certify, that I on the thirtieth day of March at (c) Oak Tree Cottage, Springfield in the county of Essex separately from any other Medical Practitioner, personally examined Maria Candler of (d) Oak Tree Cottage, Springfield and that the said Maria Candler is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) General incoherence — inability to reason correctly — forgetfulness of persons who have been present as the nurse, who has been with her 10 months, she tells me she does not know who she is

2. Other facts (if any) indicating Insanity communicated to me by others (g) Charlotte Green, the nurse, says she is incoherent, and in dressing her and undressing exercises violence; also says the boy often does not know her own husband.

Signed, *Name,* Daniel Wheeler

Place of Abode, Chelmsford

Dated this thirtieth day of March One Thousand Eight Hundred and Sixty seven.

Wednesday April 3rd

Received Mrs Candler
gave her a Bath found
several Blk marks about
the Shoulders & arms
which may have been
caused by been held
whilst dressing & un-
dressing she is strongly
resisting - the skin
not broken in any part

S. Akam

273

No 1112. Lucy Corder.

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

(a) House or hospital.

was admitted into this (a) as a Private Patient, on the

. Day of 186 , and I

hereby transmit a Copy of the Order and Medical Certificates on which he

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

was received (b)

are correct

The accompanying "Copies of Order" and Medical Certificates on which Mrs Lucy Corder was admitted into Hendon House

Signed, C Reece

(c) Superintendent or proprietor of ——.

(c) Proprietor

Hendon House, Hendon

Middlesex.

Dated this Day of

One Thousand Eight Hundred and Sixty three.

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

Copy

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Lucy Corder whom I last saw at Ovingham in the County of Northumberland on the Seventeenth day of July (a) a (b) as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) Lunatic, or an idiot, or person of unsound mind.

Subjoined is a Statement respecting the said Lucy Corder

Signed, *Name,* Alexander Corder.

Occupation (if any), Linen Draper

Place of Abode Sunderland.

Degree of Relationship (if any), or other circumstances of connection with the Patient Husband.

Dated this Twenty third day of July.

One Thousand Eight Hundred and Sixty six

To Miss Deuce

(c) Proprietor or superintendent of.

(d) *Describing the house or hospital by situation and name, if any.*

(c) Proprietor of (d) Hendon House Hendon.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Lucy Corder
Sex and Age	Female sex Thirty years.
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	No occupation
Religious Persuasion, as far as known	Member of the Society of Friends.
Previous Place of Abode	Fawcett Street, Sunderland.
Whether First Attack	The second attack.
Age (if known) on First Attack	Twenty four.
When and where previously under Care and Treatment	Under private care & treatment.
Duration of existing Attack	Two Months.
Supposed Cause	Weakness consequent on Childbirth & lactation.
Whether subject to Epilepsy	No.
Whether Suicidal	A tendency to Suicide was manifested at first.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None.
Name and Address of Relative to whom Notice of Death to be sent	The undersigned

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Alexander Corder

Occupation (if any), Linen Draper

Place of Abode, Sunderland.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband.

Copy.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Dennis Embleton M.D. F.R.C.P.
being a (a) Fellow of the Royal College of Physicians in London Lond.
and being in actual practice as a (b) Physician
hereby certify, that I, on the Nineteenth day of July 1866.
at (c) Ovingham
in the County of Northumberland separately from any other Medical Practitioner,
personally examined Lucy Corder
of (d) Fawcett Street Sunderland and that
the said Lucy Corder
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Persistence in refusing to take food or Medicine & to go to bed, on one or two occasions has shown a tendency to suicide. Has delusions as to the identity of her intimate friends.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name Dennis Embleton
Place of Abode 39. Northumberland St Newcastle on Tyne
Dated this Twenty first day of July. One Thousand Eight Hundred and Sixty Six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Stevenson Brady
being a (a) Member of the Royal College of Surgeons of England and Licentiate of the Apothecaries Company
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty first day of July.
at (c) Ovingham
in the County of Northumberland separately from any other Medical Practitioner,
personally examined Lucy Corder
of (d) Fawcett Street Sunderland and that
the said Lucy Corder.
is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She has groundless fears as to her Children, and delusions as to the identity of her relatives; has attempted to destroy herself. and obstinately refuses to take food.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, George S. Brady
Place of Abode, 22. Fawcett Street Sunderland
Dated this twenty third day of July One Thousand Eight Hundred and Sixty Six.

Thursday April 4th

Received Mrs Corder

gave her a Bath found

her very unruly —

many marks & bruises

about the person — Shoulders & arms

since she retired seems

to have given herself

up to silent weeping

S. Akam

No 1112. Lucy Corder.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 15th day of April 1867, of Lucy Corder a Private Patient in Hendon House, Hendon, Middlesex, to The Retreat, York. ~~House,~~

Given under our hands this 29th day of March in the year of Our Lord One Thousand Eight Hundred and Sixty Seven

John D Claton
John Foster
} Commissioners in Lunacy.

ORDER.

I,* Alexander Corder the undersigned having Authority to discharge Lucy Corder a Private Patient in Hendon House, Hendon, Middlesex, hereby order and direct that the said Lucy Corder be removed therefrom to The Retreat, York. ~~House,~~

Mr Corder must fill up & sign this also

Given under my hand this* 4th day of April in the year of Our Lord One Thousand Eight Hundred and Sixty 7

(Signed) Alexander Corder

Place of Abode Sunderland

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients – The Committee of the Person.

1000 3 | 66—T & S
1751

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No 1113.
Wm Gregory.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive ~~[illegible]~~ William Gregory whom I last saw at Winson Green ~~the 18th~~ name in full on the Eighteenth day of Fourth Month (a) 1867 a (b) person of 1867 unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said William Gregory

Signed, *Name,* Charles Sturge
Occupation (if any), Corn Merchant
Place of Abode, Birmingham
Degree of Relationship (if any), or other circumstances of connexion with the Patient none

Insert the date

Dated this 1st Day of ~~April~~ May 1867
One Thousand Eight Hundred and Sixty seven

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	William Gregory
Sex and Age	Male about 40
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Clerk
Religious persuasion, as far as known	Quaker
Previous Place of Abode	Lady Wood Lane Birmingham
Whether First Attack	2nd attack
Age (if known) on First Attack	30
When and where previously under Care and Treatment	at Winson Green & the Retreat
Duration of existing Attack	— 6 weeks
Supposed Cause	see 9 & 13
Whether subject to Epilepsy	— no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	~~[illegible]~~ No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	done
Name and Address of Relative to whom Notice of Death to be sent.	James Gregory Evesham his uncle

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Charles Sturge
Occupation (if any), Corn Merchant
Place of Abode, Birmingham
Degree of Relationship (if any), or other circumstances of connexion with the Patient none

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Green being a (a) member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the twenty fifth day of April 1867 at (c) the Birmingham Borough Lunatic Asylum in the County of Warwick separately from any other Medical Practitioner, personally examined William Gregory, Clerk, since the 14th of (d) march last a pauper patient Warwick, and that the said William Gregory is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) A fixed frown - a look of distrust & suspicion. He is silent, never speaks unless spoken to, & then unwillingly. Many of his replies to questions are irrelevant. At one time he refused all sustenance & he still takes food reluctantly - saying he has "no right to it & shall be sent to prison for taking it." He is suspicious of others "Every one (he says) seems down upon him & make him as if he was responsible for them"

(g) *Here state the information, and from whom.*

2. ~~Other facts (if any) indicating Insanity communicated to me by others (g)~~

Signed, *Name,* Thos. Green

Place of Abode, Birm.m Boro' Lunatic Asylum

Dated this 25th day of April One Thousand Eight Hundred and Sixty seven

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles Townsend being a (a) Member of the Royal Coll. of Surgeons, Engd and being in actual practice as a (b) Surgeon hereby certify, that I on the Twenty fifth day of April 1867 at (c) the Birmingham Borough Lunatic Asylum in the county of Warwick separately from any other Medical Practitioner, personally examined William Gregory, Clerk since the 14th of (d) March last a Pauper Patient, Warwick and that the said William Gregory is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherence of speech. He says he is full of food. That he is "always eating" & that is of no use for there is no passage for it. He That is all he says - frowning at any one questions & refuses to take the least interest in surrounding objects

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Charles Townsend

Place of Abode, 10 Charlotte Road, Edgbaston

Dated this Twenty fifth day of April One Thousand Eight Hundred and Sixty seven.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

not in membership but Father was a relations all

2. Where was the place of birth of the patient? Birmingham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

none

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

an intelligent youth nothing peculiar

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educating at the Free Grammar School a fair Classical Scholar

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Served an Apprenticeship to the Tea Trade

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

never married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

no

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

disappointed in Love

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

not until now

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

no believe Suffered from a nervous affection some years back

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Mother now in an Asylum

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

See answer to No. 9 in connection with fear of Drummond Cop —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

about 30

15. What has been the duration of the present attack?

6 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

one of a similar character

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

complete for 10 years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

none

19. What were the first decided symptoms of mental aberration?

neglected his business

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

no

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

In Birmingham Asylum where he did not improve but subsequently removed in the Retreat at York

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Gregory
Evesham

1867

May th 1st

Received Mr Wm Gregory into my care, bathed and examined him, lameness in the left leg, other parts of the body seemed to be allright.

Geo. L. Leasdale

No 1114.

William Lloyd.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Lloyd

C.R.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

whom I last saw at York
on the 24th day of 4th Month (a)
a (b) Person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said William Lloyd

Signed, *Name,* Christopher Robinson
Occupation (if any), Grocer
Place of Abode, York.
Degree of Relationship (if any), or other circumstances of connexion with the Patient An overseer in York Meeting of Friends.

Dated this 13th Day of 5th Month
One Thousand Eight Hundred and Sixty Seven.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	William Lloyd.
Sex and Age	Male. Age 75
Married, Single, or Widowed	Widower
Condition of Life, and previous Occupation (if any)	Gentleman
Religious persuasion, as far as known	Friend.
Previous Place of Abode	Tuxford.
Whether First Attack	No.
Age (if known) on First Attack	About 60 years.
When and where previously under Care and Treatment	The Friends' Retreat, York.
Duration of existing Attack	A week
Supposed Cause	Unknown.
Whether subject to Epilepsy	No.
Whether Suicidal	Yes.
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Unknown.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Christopher Robinson
Occupation (if any), Grocer
Place of Abode, York
Degree of Relationship (if any), or other circumstances of connexion with the Patient No relationship to him

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the thirteenth day of May
at (c) the house of Mrs Penty, Fulford - York
in the County of York separately from any other Medical Practitioner,
personally examined William Lloyd, Gentleman
of (d) a lodger for many years with Mrs Penty - Fulford and that
the said William Lloyd
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is low & depressed. says that he has been tempted & dare not go up stairs, for fear of throwing himself down.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs Penty tells me, that he will not be left by himself as he fears, that he will commit suicide

Signed, *Name,* William Procter
Place of Abode, 24 Petergate - York

Dated this thirteenth day of May One Thousand Eight Hundred and Sixty seven

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William Nook
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 13th day of May 1867
at (c) the house of Mrs Penty Fulford near York
in the county of York separately from any other Medical Practitioner,
personally examined William Lloyd, gentleman
of (d) a lodger for many years with Mrs Penty of Fulford and that
the said William Lloyd
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) a state of desponding which renders him unfit for the ordinary duties of life a belief that he is lost & has no hope for the future.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. Nook
Place of Abode, 31 Castlegate York

Dated this 13 day of May One Thousand Eight Hundred and Sixty seven.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

No 1115.
Charlotte Burgess.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

yes

2. Where was the place of birth of the patient?

Park Lane N. Leek - Staffordshire.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

married at the age of 45 — no children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

no: unless it may be stated that she is in the station of minister in the Society of Friends & has been strongly devoted to the cause of the Slaves.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

no. —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

no. —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

no. —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

no. —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

this is the first attack of insanity
though she has been in such an excited state at different times during the last five years, as appeared at times almost to upset her reason. —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

nearly five weeks.—

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

she has been subject to mental depression for more than twenty years; the last attack of which came on in Jan.y last & subsided about the middle of May: they have usually lasted 4 or 5 months— but have not materially affected her sleep or bodily health.—

19. What were the first decided symptoms of mental aberration?

great excitement restlessness, & spending her money needlessly.—

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

by taking a decided aversion to her husband, on the ground of his not falling in with her wishes; & accusing him of not providing sufficient & suitable food for her: her dislike to her husband for the above cause is the principle feature, but there are a variety of others which there is not room here to state.—

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

she has not attempted any acts of destruction, but has struck her husband three times, & her attendant twice.—

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

no.—

23. What are the habits of the patient as regards personal cleanliness and decorum?

pays great regard to personal cleanliness, dress and when she is calm & quiet is very decorous.—

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

yes, excepting restlessness she has an ulcer on her left leg which doubtless has been aggravated by her excited state.—

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wilson Burgess
Lark Hill
Worcester.

No 1115. Charlotte Burgess

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Charlotte Burgess whom I last saw at Lark Hill Nr. Worcester on the 4th day of July 1867 (*) a (a) person of unsound mind as a Patient into your House.

(*) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Charlotte Burgess.

Signed, *Name,* Wilson Burgess
Occupation (if any), None
Place of Abode, Lark Hill Nr. Worcester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband.

Dated this 6th Day of July
One Thousand Eight Hundred and Sixty seven.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Charlotte Burgess.
Sex and Age	Female — 79. —
Married, Single, or Widowed	Married —
Condition of Life, and previous Occupation (if any)	Middle station of life, has been companion to a female friend
Religious persuasion, as far as known	The Society of Friends.
Previous Place of Abode	Lark Hill — Worcester. previous to marriage Carr Wood Nr. Sheffield
Whether First Attack	yes —
Age (if known) on First Attack	79. —
When and where previously under Care and Treatment	
Duration of existing Attack	about Five weeks —
Supposed Cause	not known. —
Whether subject to Epilepsy	No. —
Whether Suicidal	Confesses she has been tempted to commit suicide. I think not, though perhaps difficult to say.
Whether Dangerous to others	
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Wilson Burgess Lark Hill Worcester.

(*) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Wilson Burgess.
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstances of connexion with the Patient

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, *viz.* gra. —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Herbert Walter Budd being a (a) Fellow of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify that I, on the Fourth day of July 1867 at (c) Lark Hill in the Parish of St Martin in the County of Worcester separately from any other Medical Practitioner, personally examined Charlotte Burgess of (d) Lark Hill in the Parish of St Martin and that the said Charlotte Burgess is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds: viz.—

(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f)— She told me she had no desire a Copy Carney & Perry, without her husbands knowledge a day his absence—argument then had being asked why she did it—she said she had a Legacy of £50 left not only to buy those but to keep them—On enquiry I found the Legacy was only £30—She confessed by threatening to burn the house down—She was very violent towards her husband & children & broke the window frames & the glass in the house door—She said to conceal what she broke below referred to, & she only bought 2 Prints & 2 Vases—

2. Other facts (if any) indicating Insanity communicated to me by others (g)— Informed me by her female Attendant, that she is a perfect person from an Asylum, that she struck her for her care without any reasonable cause, & that she was in the habit of doing about their ears. She told she would set fire to the House & burn it down about their ears. She also said she would set fire to Lunatics &c. now obviously removed.—

Signed, Herbert W. Budd

Name, Herbert W. Budd

Place of Abode, Lark Hill Worcester

Dated this Fourth day of July One Thousand Eight Hundred and Sixty seven—

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, *viz.* gra. —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an Idiot, or a person of unsound mind.

I, the undersigned, Thomas William Walsh being a (a) Fellow of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I on the fifth day of July 1867 at (c) Lark Hill, St Martins Parish, in the county of Worcester separately from any other Medical Practitioner, personally examined Charlotte Burgess of (d) Lark Hill, Charlotte Burgess the said and that is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f) Stateth that she has been Violent to her husband & acknowledges she has threatened to burn the house down—Stateth that she believing she is justified in separating from her husband though she cannot accuse him of any act of cruelty beyond unkind words—this being contrary to the advice of her friends at the marriage—

2. Other facts (if any) indicating Insanity communicated to me by others (g) I am informed by her husband that she struck him twice also by her attendant—that she struck her twice—Told Mr Rennick, a neighbour that she would soon get rid of her attendant by giving her in charge of the Police—Has attempted to escape from the house three times, once for Rennick tells me she (being 80 years of age & suffering from an ulcered leg) proposed walking to the Railway station a distance of a mile and was with difficulty dissuaded—

Signed, T. W. Walsh

Name, T. W. Walsh

Place of Abode, Worcester

Dated this fifth day of July One Thousand Eight Hundred and Sixty seven

Informed Mr Rennick her neighbour, she found she had ordered one morning at 7 o'clock the Grocer to bring 12 bottles of Gin—a quantity not to be obtained with her to bite—& Many things. Mrs Hemphill to do so by herself and her husband—

No 1116.

Alicia Barker.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A Member.

2. Where was the place of birth of the patient?

Colchester.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No. —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

No. —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

She was educated at home in the ordinary way.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

She was always regular, orderly & industrious.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

She has always been very earnest in the study of Natural History.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No. —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No. —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No. —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Her Maternal Aunt was insane. —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Unknown.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About the age of 18.

15. What has been the duration of the present attack?

About two months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

She has had four previous attacks, of the same nature as the present one, usually lasting two or three months.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Yes; and lasted for several years.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

It was preceded by alternate elevation & depression of spirits. The sleep & health not materially affected.

19. What were the first decided symptoms of mental aberration?

She was under the impression that every one she met was a Policeman in disguise, come to take her.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Her mind is affected by a great number of delusions upon various subjects.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Attention to the general health, with no good result.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be stationary, there are lucid intervals at uncertain times.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

George Marriage Esq.
The Retreat
Broomfield
Nr. Chelmsford Essex

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Alicia Barker

whom I last saw at Walton on the Naze

on the 1st day of July 1867 (a)

a (b) Lunatic as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said

Signed, *Name,* Henry Marriage Junr.

Occupation (if any), Miller & Farmer

Place of Abode, Broomfield Wm Chelmsford

Degree of Relationship (if any), or other circumstances of connexion with the Patient Exor of late Jas Barker her Father

Dated this 6th Day of July

One Thousand Eight Hundred and Sixty 7

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Alicia Barker.
Sex and Age	Female, 53.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Gentlewoman.
Religious persuasion, as far as known	Member of the Society of Friends.
Previous Place of Abode	Walton on the Naze, Essex.
Whether First Attack	No.
Age (if known) on First Attack	About 18.
When and where previously under Care and Treatment	With her friends.
Duration of existing Attack	Two weeks.
Supposed Cause	Unknown.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	Sarah Barker, Bishops Hall Mill Chelmsford Essex

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Marriage Junr.

Occupation (if any), Miller

Place of Abode, Broomfield Wm Chelmsford

Degree of Relationship (if any), or other circumstances of connexion with the Patient Exor to her Father, Jas Barker

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Osmond M.R.C.S.E. et L.S.A.
being a (a) Surgeon & Apothecary.
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify that I, on the 26th day of July
at (c) No 3 Esmeralda Place Walton-on-the Naze
in the County of Essex. separately from any other Medical Practitioner,
personally examined Alicia Barker
of (d) No 3 Esmeralda Place Walton-on-the Naze and that
the said Alicia Barker
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Constantly talking. Complaining that when she walked out she saw persons of a black & white colour constantly flying about her and staring in her face. Afraid to walk to Walton Hall without protection. Covering up her head with shawls &c.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Shouting at the window. Desirous of going out without her clothes. Believing every one a spy & policeman in plain clothes.
By her sister Emma Barker. Dancing round a lamp post in the street.
By Mrs Mary Mann

Signed, *Name,* Thomas Osmond
Place of Abode, Thorpe-le-Soken. Essex

Dated this 26th day of July One Thousand Eight Hundred and Sixty seven.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Maurice L Mauleverer.
being a (a) Member of the Royal College of Surgeons and Licentiate of Apothecaries Company.
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify, that I on the 26th day of July
at (c) No 3 Esmeralda Place, Walton on the Naze
in the county of Essex separately from any other Medical Practitioner,
personally examined Alicia Barker
of (d) No 3 Esmeralda Place Walton on the Naze and that
the said Alicia Barker
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is restless and excited, sometimes she appears to speak, and at others talks in a rambling, incoherent manner, so that it is impossible to understand what she means.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her sister Emma Barker informs me that she will knock at the walls of her room for hours at a time during the night and make strange noises imitating various animals, as crowing like a cock &c.

Signed, *Name,* Maurice L Mauleverer
Place of Abode, Thorpe le Soken

Dated this 26th day of July One Thousand Eight Hundred and Sixty seven.

No 1117.

John Kelly.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Kelly whom I last saw at Scarborough on the 22nd day of September (*) a (†) Lunatic as a Patient into your House.

(*) Within one month previous to the date of the order.
(†) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said John Kelly

Signed, *Name,* John Kelly
Occupation (if any), Joiner & Builder
Place of Abode, 17 Blenheim Terrace Scarborough
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this three Day of September
One Thousand Eight Hundred and Sixty Seven

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Kelly
Sex and Age	Male aged 28 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Architect
Religious persuasion, as far as known	Roman Catholic
Previous Place of Abode	16 Spring Field Row Leeds
Whether First Attack	yes
Age (if known) on First Attack	28
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	a week
Supposed Cause	overtaxing his brain
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	John Kelly 17 Blenheim Terrace Scarborough

(*) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) John Kelly
Occupation (if any), Joiner & Builder
Place of Abode, 17 Blenheim Terrace Scarborough
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John G. Hickson M.D. Edinbro', being a (a) Physician and being in actual practice as a (b) Physician at Scarbro' hereby certify that I, on the third day of September, 1867 at (c) 17 Bigbarn Terrace, Scarbro' in the County of York separately from any other Medical Practitioner, personally examined John Kelly of (d) 16 Springfield Place, Leeds, architect, and that the said John Kelly is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Fancies he sees flies about the cloth. Extremely violent, struck at people about him. Continually quoting incoherently from the Roman Missal. Shrieking at imaginary objects.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Father states he struck at him and tried to force him out of the window — that he thinks his betrothed will marry our Saviour and then all the world will be saved.

Signed, Name, John G. Hickson, M.D.

Place of Abode, Hunstil, Row, Scarbro'

Dated this 3rd day of September One Thousand Eight Hundred and Sixty 7.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Horne M.D. Edin being a (a) General Practitioner and being in actual practice as a (b) 3rd General Practitioner hereby certify, that I on the day of September 1867 at (c) 17 & 18 Cambering Terrace, Scarborough in the county of York separately from any other Medical Practitioner, personally examined John Kelly architect of (d) 16 Springfield Place Leeds and that the said John Kelly is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

He is extremely violent and unmanageable. Strikes at his brother. He has numerous delusions. Imagines he sees flies on every object. He is always blowing them away.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Brother says He has struck at his father making a bruise on his head. ordered his father to clear the room by the window instead of the door.

Signed, Name, J. Horne M.D.

Place of Abode, 15 Albemarle Road Scarborough

Dated this third day of September One Thousand Eight Hundred and Sixty seven.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient? Dewsbury.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
always very studious.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
very clever & bright as a boy.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
Educated at Mr Hayes' School at Leeds.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Generally regular. but. did go astray. smoked hard for 4 years. then he suddenly left off about 2 months ago.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
He formed an attachment for a young woman objectionable to her family. at one time he gave her up. then took to her again. found that she had a mother from [illegible] to marry her. this was a week ago.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
Never.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
always healthy. but. very neglectful of the state of his bowels.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
His maternal grandmother died of brain fever.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack? About a week.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

He has not plate turned out his designs so clearly & well finished as formerly. He is of a reserved & quiet disposition.

19. What were the first decided symptoms of mental aberration?

A gradual cooling of his affections towards his own family.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He is maniacal & violent - suddenly starting in a spasmodic way.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

He is.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No -

23. What are the habits of the patient as regards personal cleanliness and decorum? Generally so.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. He is in good bodily health.

He is wd st. between eleven & four.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

None.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Kelly
Blenheim Tenace.
Scarborough.

No. 1118.
Sarah Sanderson.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Sanderson

whom I last saw at 13 Belle Vue Street York

on the thirteenth day of 9th mo (a)

a (b) Lunatic as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Sarah Sanderson

Signed, *Name,* ~~[illegible]~~ Henry Hipsley

Occupation (if any), ——

Place of Abode, ~~[illegible]~~ Holgate nr York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Dated this 10th Day of Octr 1

One Thousand Eight Hundred and Sixty Seven

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Sarah Sanderson
Sex and Age	female — Fifty years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	York
Whether First Attack	Not first
Age (if known) on First Attack	suppose about 19
When and where previously under Care and Treatment	At the Retreat
Duration of existing Attack	Slightly for six months
Supposed Cause	no assignable Cause
Whether subject to Epilepsy	Not
Whether Suicidal	Yes
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	—
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent.	Henry Hipsley, Holgate nr York

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Hipsley

Occupation (if any), ——

Place of Abode, Holgate nr York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

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MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the tenth day of October 1867
at (c) 13 Bellevue Street York
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Sanderson
of (d) 13 Bellevue Street York Single woman and that
the said Sarah Sanderson
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz :—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Depression of Spirits sunken Dismis. countenance I
Hallucinations of sight & hearing

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Samuel William North
Place of Abode, 31 Castlegate York
Dated this 10th day of October One Thousand Eight
Hundred and Sixty seven

MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Alfred Ball
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the tenth day of October 1867
at (c) 13 Belle vue Street, York
in the county of York separately from any other Medical Practitioner,
personally examined Sarah Sanderson
of (d) 13 Belle vue Street, York, single woman and that
the said Sarah Sanderson
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Great depression of spirits - hallucination,
believes she sees faces without bodies moving
about her especially at night, hearing sounds,

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
has not a proper command over herself

Signed, *Name,* Alfred Ball
Place of Abode, 6 Leonards place York
Dated this tenth day of Octr One Thousand Eight
Hundred and Sixty seven

October 11th 1862

Dr Stitching

I find I Sanderson

all right and free

from Bruises or

any injury of any

Kind

Anne Clarkson

No 1119.
Eliz. S. Jeffrey.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the oldest and youngest would have attained, supposing them to have survived.

Six Children all living - Two sons and four daughters, Eldest Thirty One - Youngest Fourteen

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She has at times manifested a disposition to refuse food.

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas Ashby Jeffrey
Pittville
Cheltenham

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Stevens Jeffrey whom I last saw at York on the Twenty Sixth day of Tenth Month (*) a (*) person of unsound Mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Elizabeth Stevens Jeffrey

Signed, *Name,* Henry Simpson
Occupation (if any), Ironmonger
Place of Abode, Melksham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Son in Law

Dated this Twenty Sixth Day of Tenth Month
One Thousand Eight Hundred and Sixty Seven

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Elizabeth Stevens Jeffrey
Sex and Age	Female - Aged Fifty Six years
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	Late Husband a Chemist
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Cheltenham
Whether First Attack	Yes
Age (if known) on First Attack	Fifty Six
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Five or Six Months
Supposed Cause	Grief
Whether subject to Epilepsy	No
Whether Suicidal	Doubtful
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Thomas Ashby Jeffrey, Pittville Cheltenham

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Simpson
Occupation (if any), Ironmonger
Place of Abode, Melksham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Son in Law

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 26th day of October 1867
at (c) The North Eastern Hotel York
in the County of York separately from any other Medical Practitioner,
personally examined Elizabeth Stevens Jeffrey
of (d) Cheltenham Widow and that
the said Elizabeth Stevens Jeffrey
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Great depression of spirits a conviction that she is lost & has no hope for the future — this conviction absorbs her whole attention & renders her unfit for the ordinary duties of life

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mr Henry Simpson informs me that the state of depression is only of a few months duration & is quite at variance with her usual habit

Signed, *Name,* S. W. North
Place of Abode, 31 Castle St York
Dated this 26 day of October One Thousand Eight Hundred and Sixty seven

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 26th day of Oct: 1867
at (c) The North Eastern Hotel York
in the county of York separately from any other Medical Practitioner,
personally examined Elizabeth Stevens Jeffrey
of (d) Cheltenham Widow and that
the said Elizabeth Stevens Jeffrey
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Intense depression of spirits, coupled with a belief that she has no hope of salvation.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Procter
Place of Abode, 24 Petergate York
Dated this 26 day of October One Thousand Eight Hundred and Sixty seven.

x Clairville House, Winchcombe St

No 1120.
Ann Beardley.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A member by Birth

2. Where was the place of birth of the patient? Bewley

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing peculiar. As a girl rejoiced women very lively & cheerful.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? There was nothing but the general average of mental & bodily health

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The understanding & affections were much cultivated in very early life. She went to Ackworth School & afterwards to Hoyland Common School near Leeds.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Brought up to domestic life very industrious, fond of reading, temperate very regular & correct.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Always Single.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? The reading of religious books her chief pursuit. nothing hobby-like - keen & very philanthropic spirit connected with her piety.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Not that I can learn or of

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? I do not remember

15. What has been the duration of the present attack? About 4 or 5 weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? Religious depression - contrary to her usual habit of religious cheerfulness.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. Chiefly by one labouring under the delusion that she has committed the unpardonable sin and is irretrievably lost.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? She now refuses to take food or to converse. Cannot sleep.

23. What are the habits of the patient as regards personal cleanliness and decorum? Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Very fair - has suffered from Dyspepsia.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect? She has been under medical care - but not treatment: & private nursing.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Increasing

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? John Yeardley

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Yeardley whom I last saw at Ackworth on the twenty-ninth day of the Tenth Month 1867 (*) a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Ann Yeardley

Signed, *Name,* John Yeardley
Occupation (if any), not in Business or occupation
Place of Abode, Rochdale
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this twenty-ninth Day of Tenth Month One Thousand Eight Hundred and Sixty Seven.

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Ann Yeardley
Sex and Age	Female — Fifty-four
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Domestic employment
Religious persuasion, as far as known	The Society of Friends
Previous Place of Abode	~~Rochdale, Pontefract &~~ Barnsley.
Whether First Attack	Second Attack
Age (if known) on First Attack	I do not remember the year —
When and where previously under Care and Treatment	Painethorpe — Dr. Kitching
Duration of existing Attack	about 4 or 5 weeks —
Supposed Cause	Religious depression —
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	John Yeardley - Albert Terrace 183 Drake St. Rochdale

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) John Yeardley
Occupation (if any), not in Business
Place of Abode, Rochdale —
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

Insert name of House &c

I, the undersigned, Frederick Gelois Jackson.
being a (a) M.R.C.S. (Lon.) L.R.A.C. (Lon.) (M.D. (Aberdeen)
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 29th day of October 1867
at (c) Ackworth House Ackworth
in the County of York separately from any other Medical Practitioner,
personally examined Ann Yeardley
of (d) Pitt Street Barnsley
the said Ann Yeardley
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f). Refuse food. Absolutely declining to consume same. - formerly took tea but refused it as it seemed against the Holy Ghost would be forgiven. Suicidal tendency

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her previous mental history communicated by her brother John Yeardley. Her total change of demeanour towards all her friends.

"Name of Brother must be given, the Patient may have more than one Brother

Signed, *Name,* Fredk Gelois Jackson (M.D.
Place of Abode, Highfield House Barnsley
Dated this 29th day of October One Thousand Eight Hundred and Sixty seven.

MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, George Wood
being a (a) L.R.C.P. Edin.& M.D. Edin.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 30th day of October 1867
at (c) Parkhouse Hill Ackworth
in the county of York separately from any other Medical Practitioner,
personally examined Ann Yeardley
of (d) Pitt Street Barnsley
the said Ann Yeardley and that
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Perhaps incorrect judgement on subjects on which people usually think alike such as believing she has sinned against the Holy Ghost & can not be forgiven - Strange & sullenness of countenance - Sleeplessness - Refusal of Nourishment - Upon her being questioned & dejected conduct - She believes her body has become blood & filthy.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
A book that her relatives should be taken away - Her total change of demeanour to her relatives & friends - communicated by Mrs Parkhouse of Ackworth -

Signed, *Name,* George Wood
Place of Abode, Parkhouse Ackworth Pontefract Yorkshire
Dated this 30th day of October One Thousand Eight Hundred and Sixty seven.

No 1121.

11 Mo 14 th 67

Having Bathed and Examined Mr Robert Taylor I find the Body much marked But no Bruses the Bodily Condition not good

Samuel Mines

Attendant

295

No 1121.
Robt Taylor.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Birthright membership —

2. Where was the place of birth of the patient?

At Close in parish of Eastingham, Yorkshire —

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Affectionate disposition, attentive as a Schoolboy. Of ordinary endowments. —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Ordinary Education

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Apprenticed as a Draper
Habits Temperate & Industrious —

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single man

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Natural history in younger days —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Paralysis in 1856

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Hemorrage from the Lungs in 1831.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

None

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Paralysis —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

46 years

15. What has been the duration of the present attack?

4 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Twice for about ten days, each time mental delusions on religious subjects.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Complete, Three years & Eight years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

nothing observed.

19. What were the first decided symptoms of mental aberration?

Religious depression

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Inability to control mental & physical powers. Chiefly on religious topics

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Yes — But not made any attack upon the life of any person —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

never refused food; attempted to get out of the window

23. What are the habits of the patient as regards personal cleanliness and decorum?

Orderly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

attended by William Reed Surgeon no alleviation mentally

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mary Rentoff
7 Park Place
York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Robert Taylor

whom I last saw at No 9 Park place, Monkgate Yorke

on the 13th day of eleventh month (*)

a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Robert Taylor

Signed, *Name,* Mary Hustoff

Occupation (if any),

Place of Abode, 9 Park Place

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this twelfth Day of Eleventh Month

One Thousand Eight Hundred and Sixty Seven

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Robert Taylor
Sex and Age	Male Fifty Seven
Married, Single, or Widowed	Single —
Condition of Life, and previous Occupation (if any)	Gentleman
Religious persuasion, as far as known	a Friend
Previous Place of Abode	~~Helmsley~~ York —
Whether First Attack	Yes
Age (if known) on First Attack	Forty Six years
When and where previously under Care and Treatment	At Wakefield & at Home
Duration of existing Attack	Four weeks
Supposed Cause	Paralysis
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	Yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Abigail Taylor 9 Park Place Monkgate York

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Richard Holdsworth

Occupation (if any), Upholsterer

Place of Abode, Wakefield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Married to Sister of the Patient's.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Reed being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify that I, on the eleventh day of November at (c) No 4 Park Place - Monkgate - York in the County of the City of York separately from any other Medical Practitioner, personally examined Robert Taylor of (d) No 4 Park Place - Monkgate and that the said Robert Taylor is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Says that he can see nothing but pecuniary ruin and talks most wildly and incoherently on religious subjects - and takes a dark & gloomy view on almost every subject

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His Sister Mrs Shuttleff states that on many occasions lately he has been extremely violent making use of very obscene language - & was obliged to be held down to prevent personal violence also that he also endeavoured to escape out of the chamber window

Signed, *Name,* William Reed

Place of Abode, 14½ Blake Street York

Dated this eleventh day of November One Thousand Eight Hundred and Sixty seven

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Temple Chevallier Paley being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon - hereby certify, that I on the eleventh day of November at (c) No 4 Park Place Monkgate York in the county of the City of York separately from any other Medical Practitioner, personally examined Robert Taylor of (d) No 4 Park Place Monkgate and that the said Robert Taylor is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) States that his worldly affairs are in inextricable difficulties & will be the ruin of his friends also states that he shall be eternally lost, at times he believes himself to be the devil.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mr R Holdsworth saw an attempt made to strike Mr Hinton & several times had to use force to prevent him injuring others,

Signed, *Name,* Temple C. Paley

Place of Abode, 23 High Petergate York

Dated this eleventh day of November One Thousand Eight Hundred and Sixty seven.

1122.

Anne Hodgson's report of Miss Syke's bodily condition Blister not healed, two bruises on one leg, one on the other.

No. 1122.
Ann Sykes.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is ~~he (or~~ she) in any way connected with the Society of Friends?

No.

2. Where was the place of birth of the patient?

Huddersfield.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Ordinary
No
No

Her disposition & character were not marked by any eccentricity or decided peculiarity — She was endowed with more than average understanding — was not precocious in intellect.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No unusual cultivation of the understanding & affections — The extent & description of literary instruction was such as is usual with young ladies and was given at home by an elder sister.

6. To what occupation was the patient brought up; and what were ~~his (or~~ her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Her chief occupation has been housekeeping — Her habits have always been industrious, temperate and regular.

7. If the patient be married, state at what age ~~his (or~~ her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Is not married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has her conduct ever exhibited a strong bias in any direction?

Has been particularly fond of drawing and fancy work — Such as moulding wax flowers &c.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Has just lost her eldest sister, who was a second mother to her.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Has suffered greatly from bilious headaches.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Both her father & mother were insane — her father in consequence of reverses in business & her mother in consequence of the father being so — They were both for some time under restraint but completely recovered.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The first attack was supposed to be owing to a disappointment of the affections — the present is attributed to the loss of her sister.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

299

14. At what age was the patient first attacked with symptoms of insanity?

At the age of 27 —

15. What has been the duration of the present attack?

5 days —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Once; — the attack lasted about three months; — acute mania.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Has been quite well from the first attack to the present —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Her spirits were somewhat elevated; she slept but little for several nights, and suffered from an attack of bilious headache —

19. What were the first decided symptoms of mental aberration?

Great excitement.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

By excessive excitement, and great talkativeness; she raves indifferently on various subjects — Has not particular or permanent delusions —

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

No —

22. Has the patient shown any disposition to refuse food, or to injure herself, and if so, in what way?

Has refused food — but has shewn no disposition to injure herself.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly & decorous —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

With the exception of the bilious attack above mentioned her bodily health has been moderately good —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

In 1851, once, for 3 months, discharged well.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Chiefly, quiet. but with no good effect —

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Appears to be stationary; — no lucid intervals; no great remissions or exacerbations —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Taylor
Magistrate for Birmingham

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Anne Sykes

whom I last saw at Holmfirth on the tenth day of twelfth month (*)
a (*) Lunatic as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Anne Sykes

Signed, *Name,* John Sykes
Occupation (if any), Timber Merchant
Place of Abode, Birmingham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this tenth Day of twelfth month
One Thousand Eight Hundred and Sixty seven

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Anne Sykes
Sex and Age	female 42
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	housekeeper
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Holmfirth
Whether First Attack	second
Age (if known) on First Attack	27
When and where previously under Care and Treatment	in 1851 at Wakefield County Asylum
Duration of existing Attack	five days
Supposed Cause	grief
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent.	Timber Merchant Sheepcote St. John Sykes Birmingham Birmingham

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) John Sykes
Occupation (if any), Timber Merchant
Place of Abode, Birmingham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Name must be given —

I, the undersigned, Charles J. Trotter being a (a) Member of the Royal College of Surgeons in London & a Licentiate of the Apothecaries' Company and being in actual practice as a (b) Surgeon & Apothecary hereby certify that I, on the tenth day of December at (c) Mount Pleasant Holmfirth in the County of York separately from any other Medical Practitioner, personally examined Annie Sykes of (d) Mount Pleasant Holmfirth and that the said Annie Sykes is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

She has a wild, vacant, restless appearance; is constantly talking in a rapid incoherent manner, when offered food will frequently spit it over her nurses; and cannot be engaged, even for a minute, in rational conversation.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

The same as the above communicated to me by the Sykes her sister, & attendants —

Signed, Name, Charles J. Trotter.

Place of Abode, Holmfirth

Dated this tenth day of December One Thousand Eight Hundred and Sixty seven —

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, William Berry being a (a) L. S. A. L. and being in actual practice as a (b) General Practitioner hereby certify, that I on the Tenth day of December 1867 at (c) Mount Pleasant Holmfirth in the county of York separately from any other Medical Practitioner, personally examined Anne Sykes of (d) Mount Pleasant Holmfirth and that the said Anne Sykes is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

She appears wild is constantly talking and does not answer questions properly. and is constantly moving to and fro.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

William Sykes has told me she has been more vailent than at present — and does not sleep

Signed, Name, William Berry L. S. A. L.

Place of Abode, Holmfirth

Dated this Tenth day of December One Thousand Eight Hundred and Sixty seven.

No 1123.

The Retreat
13 Gallery
Dec 12th 1867

Received
Jonathan Burgess
into this Gallery, I
gave him a warm
Bath according to rule,
I observed no recient
mark or bruise, he
wears bandages on
both legs, on account
of large veins. he also
wears a Single Truss

John. Poulter

No 1123.

Jon^a Burgess

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A member by birth

2. Where was the place of birth of the patient? Spalding — Lincolnshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Partial imbecility from Childhood

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Farming

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
Not known to have had such attacks

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry Hipsley, Holgate near York

Terms 12/ quarterly

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jonathan Burgess whom I last saw at York on the twelfth day of December (*) a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Jonathan Burgess

Signed, *Name,* Henry Hipsley

Occupation (if any), —

Place of Abode, Scarrs Place Holgate near York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousin by Marriage

Dated this twelfth Day of March One Thousand Eight Hundred and Sixty seven

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Jonathan Burgess
Sex and Age	Male — 53 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No Occupation
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Auburn near York
Whether First Attack	Partially imbecile from childhood
Age (if known) on First Attack	
When and where previously under Care and Treatment	Under no following care
Duration of existing Attack	Indefinite
Supposed Cause	Probably hereditary
Whether subject to Epilepsy	Not
Whether Suicidal	Uncertain
Whether Dangerous to others	Violent under irritation
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Edward Hipsley, Ellis, Leicester

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Hipsley

Occupation (if any), —

Place of Abode, Scarrs Place Holgate near York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousin by Marriage

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William York
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 12th day of December
at (c) The Micklegate Bar Dining Rooms York
in the County of York separately from any other Medical Practitioner,
personally examined Jonathan Burgess
of (d) County Residing at Nabum nr York of no occupation and that
the said Jonathan Burgess
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

He is imbecile— not able to sustain any conversation
reads his Bible but does not know who Jesus Christ was

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Samuel William York
Place of Abode, 31 Micklegate York
Dated this 12th day of December One Thousand Eight
Hundred and Sixty seven

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Alfred Ball
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twelfth day of December
at (c) Micklegate Bar Dining Rooms, York
in the county of York separately from any other Medical Practitioner,
personally examined Jonathan Burgess
of (d) recently, residing at Nabum nr York of no occupation and that
the said Jonathan Burgess
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

Evidently a person of very feeble intellect is
unable to carry on any rational conversation, & seems
quite incapable of taking care of himself

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Alfred Ball
Place of Abode, 9 St Leonards Place York
Dated this 12th day of December One Thousand Eight
Hundred and Sixty seven

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No 1124 John Hammond

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

He is a Member I believe by convincement

2. Where was the place of birth of the patient? My knowledge of John Hammond only extends to the time of his residence in Bristol about 13 years I am informed that he was born.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not aware see No 2

Wm Wicks Easton Road Bristol

4. What appeared to be the disposition and character during the youth of the patient; were those marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

see No 2

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

see No 2

6. To what occupation was the patient brought up; and what were his (~~or her~~) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

See No 2

7. If the patient be married, state at what age his (~~or her~~) marriage took place; also the number of children if any, and the age which the ~~eldest~~ and youngest would have attained, supposing them to have survived.

He is a Widower – his wife died about a year ago. I am informed that he was married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Not aware

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Not aware, except it be the death of his wife

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Not aware that he was

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Not aware that he did

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Not aware

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The effect of increasing age, together with the loss of his wife & having no relative to watch over him

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

See No 13

15. What has been the duration of the present attack?

He has been very eccentric & sinful in his conduct since he has been without a Garden & come to reside in the City — but not until since his wife's death has he become unmanageable

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

See No 15

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

See No 15

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

See No 15

19. What were the first decided symptoms of mental aberration?

See No 15

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Inability to manage Money, which he squanders often without Reason — and remarkable restlessness — more especially at night

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

His personal habits are not cleanly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

His general health is pretty good, but varies with the state of his mind, appearing to suffer when that is in a disturbed condition

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

I believe not

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

None particularly

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

He is increasingly difficult to manage

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Hammond

whom I last saw at Friends Meeting Bristol

on the 19th — day of last Month 1868 (*)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind,

a (*) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said John Hammond

Signed, *Name,* Joseph Fry

Occupation (if any), Chemist Merchant

Place of Abode, Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient as a Member of the same Monthly Meeting

Dated this 19th Day of 1st Month

One Thousand Eight Hundred and Sixty Eight

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Hammond
Sex and Age	Male – about 82 years. ×
Married, Single, or Widowed	Widower.
Condition of Life, and previous Occupation (if any)	Living retired formerly a gardner
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	Bristol.
Whether First Attack	First attack.
Age (if known) on First Attack	About 82yrs. ×
When and where previously under Care and Treatment	never
Duration of existing Attack	some months say six ×
Supposed Cause	Old age & loss of his wife
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	no
Name and Address of ~~Relative~~ Friend to whom Notice of Death to be sent.	Joseph Fry, Treasurer of Bristol Monthly Meeting's

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Samuel Capper

Occupation (if any), Commission Agent

Place of Abode, Cotham Brow Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient Member of the acting Committee of Bristol Monthly Meeting.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Ormonde Society
being a (a) Member of the Royal College of Surgeons & Licentiate of the Apothecaries of London
and being in actual practice as a (b) Surgeon &c.
hereby certify that I, on the Seventh day of January 1868
at (c) 7 Easton Road
in the County of Bristol separately from any other Medical Practitioner,
personally examined John Hammond
of (d) 7 Easton Road (formerly a Gardener)
the said John Hammond
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) When I visited him he was very feeble and emaciated apparently - he told me that he like to the Paul had been often in jeopardy of his life - being both in prison and stoned, and perils through his own kind. He gave me an account of the strength he possessed by an elderly shutting the letter with his fists and calling out as loudly as he was able - he also sang a part of a song in which he mentioned of him as an angry [illegible]

2. Other facts (if any) indicating Insanity communicated to me by others (g)
The belief of him on those of his Servants, and his Landlady (a
that he is not competent to take care either of his Money or person

Signed, Name, William Ormonde
Place of Abode, 19 Portland Square Bristol
Dated this Seventh day of January One Thousand Eight
Hundred and Sixty Eight

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. —Follow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Name of Informant to be given
Samuel Cossins
Rockcliffe Bullock
Bristol

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Alfred Smith Society
being a (a) Member of the Royal College of Surgeons & Licentiate of the Apothecaries of London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Seventh day of January 1868
at (c) 15 Easton Road
in the county of Bristol separately from any other Medical Practitioner,
personally examined John Hammond
of (d) 7 Easton Road - (Gentleman) and that
the said John Hammond
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) On my visit to day he told me he had been out rigging with a spade all the morning (which was not true) he was a mile to himself - he then struck his chest most violently, and shook his fist at me - then he said he was a poetical man and he could jump like a lion and attempted to do so - throwing out his arms

2. Other facts (if any) indicating Insanity communicated to me by others (g) and last week previously - His Landlady tells me he very frequently gets into bed, in the day time with all his clothes on - then he gets frequently set up at night, and want to leave the house says it is necessary. He frequently raves at his Landlady and says he has something in his hands and has not the least idea of the value of money.

Signed, Name, Alfred Smith
Place of Abode, 15 Brunswick Square Bristol
Dated this Seventeenth day of January One Thousand Eight
Hundred and Sixty Eight

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. —Follow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Mrs Meeks
Easton Road Bristol
Name of Informant to be given

No 1125

Hannah McDermid

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In Membership by birthright

2. Where was the place of birth of the patient?

Stockbridge Edinburgh

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Delicate in early infancy to 6 months old

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Cheerful, but nothing remarkable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated in infancy at home, & at a day school in Edinburgh & one & a half years at Leighton School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Domestic servant, in youth industrious & cleanly but in later years the reverse. Always temperate conduct strictly moral

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the ages which the eldest and youngest would have attained, supposing them to have survived.

Spinster

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Nothing unusual has been observed

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Nothing to our knowledge

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Subject to Epileptic fits from youth at long intervals

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Water in the head at 18 months old, a severe attack

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

None to our knowledge

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Cause unknown

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over, and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

At 30 years old or thereabouts

15. What has been the duration of the present attack?

Threatening violence frequently during the last fortnight in fits of passion

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

For many years used threatening & abusive language & during the last fortnight attempted to put her threats into execution

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Has been sullen for years & would speak to no one except when excited. Talks to herself in an under tone & frequently laughing or crying at the time

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

During the last 3 years we have frequently thought she looked ill, but when asked if she answered at all she always said, No! On one occasion we called the Doctor she refused his medicine. Never retires before midnight is frequently awake in the night but sleeps during the forenoon

ans.r to Question 19

Using bad language

19. What were the first decided symptoms of mental aberration?

Ans.r to Question 20

Quite indifferent to all that passes. Orders her mother & others to "go home & never enter this house again"

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Destroying food especially bread. Made a dangerous attack on her mother & sister with a knife on the 19th inst without any apparent cause

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Very particular about her food, refused animal food for many months about 3 years ago. Shows no disposition to injure herself.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Neglects washing herself or changing her clothes

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Very stout & good apetite until last 3 years since which time her apetite has not been good & she has become very thin but will not tell when asked if she is ailing

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never in Asylum or hospital

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

Dr. Fothergill sent her medicine but she positively refused to take any of it.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing. Very quiet after each attack which occurs at intervals, uncertain.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Darlington Monthly Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Hannah McDermid Jr

whom I last saw at 12 Albion St Darlington

on the 22d day of 1st month 1868 (*)

a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Hannah McDermid

Signed, *Name,* J McSparkes

Occupation (if any), Bankers clerk

Place of Abode, Darlington

Degree of Relationship (if any), or other circumstances of connexion with the Patient Acting as Overseer for Darlington Monthly Meeting of Friends.

Dated this 22d Day of 1mo

One Thousand Eight Hundred and Sixty Eight.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Hannah McDermid Junr
Sex and Age	Female 42 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Residing at home previously Domestic duties
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Last situation at Worcester in 1858.
Whether First Attack	First attack
Age (if known) on First Attack	Symptoms first observed at the age of 30 years
When and where previously under Care and Treatment	Never under care or treatment
Duration of existing Attack	Gradually increasing for 13 years
Supposed Cause	Not known
Whether subject to Epilepsy	Subject to epilepsy
Whether Suicidal	Not
Whether Dangerous to others	Has appeared dangerous for a fortnight
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Hannah McDermid, 12 Albion Street Darlington

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) David McDermid

Occupation (if any), Cabinet Maker

Place of Abode, 70 Northgate Darlington

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Hayes Jackson being a (a) Fellow of the Royal College of Physicians of Edin. and Member of the Royal College of Surgeons, London. and being in actual practice as a (b) general practitioner hereby certify that I, on the 21st day of January 1868 at (c) 12 Albion Street, Darlington in the County of Durham separately from any other Medical Practitioner, personally examined of (d) Albion St. Hannah McDermid Junior and that the said Hannah McDermid Junior is a (e) person insane and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) From the evasive and maniacal appearance of the eyes. From the torn and filthy state of her apparel. From her incoherent manner in conversation, or answering any questions.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) I am informed by her mother Mrs McDermid, that she is liable to the most violent paroxysms of rage, swearing oaths, and using bad language, when kindly treated and also siezed a knife threatening to stab her and cut off her head.

Signed, Name, Thos. Hayes Jackson

Place of Abode, Darlington

Dated this 21st day of January One Thousand Eight Hundred and Sixty eight

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, S Remington Fotheyill being a (a) Doctor of Medicine of the University of St Andrews and Licentiate of the College of Surgeons of Edinburgh and being in actual practice as a (b) general Practitioner hereby certify, that I on the twenty first day of January 1868 at (c) 12 Albion Street Darlington in the county of Durham separately from any other Medical Practitioner, personally examined of (d) 12 Albion Street Darlington Hannah Macdermid Junr and that the said Hannah Macdermid Junr is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) The slovenly appearance of her person and the want of intelligence of her look and her want of ability to enter in the conversation

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) I am informed by ~~Mrs~~ Macdermid her mother that she is in the habit of using abusive and threatening language and on Sunday flourished a knife in dangerous proximity to her daughter and herself at the same time using threatening language

Signed, Name, S Remington Fotheyill

Place of Abode, Darlington

Dated this Twenty first day of January One Thousand Eight Hundred and Sixty eight

No 1126

Sarah M. Hodgson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Marshall Hodgson

whom I last saw at York.

on the First day of February. (*)

a (*) Person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Sarah M. Hodgson

Signed, *Name,* James Hodgson

Occupation (if any), Corn Miller

Place of Abode, Rotherham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son.

Dated this Seventh Day of February.

One Thousand Eight Hundred and Sixty Eight.

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Sarah Marshall Hodgson.
Sex and Age	Female, Sixty Seven Years.
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	Wesleyan
Previous Place of Abode	Rotherham
Whether First Attack	No.
Age (if known) on First Attack	Not known
When and where previously under Care and Treatment	At the Retreat nr York
Duration of existing Attack	Three months
Supposed Cause	Unknown
Whether subject to Epilepsy	No.
Whether Suicidal	Probably
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	James Hodgson. Rotherham

(e) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) James Hodgson

Occupation (if any), Corn Miller

Place of Abode, Rotherham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, William Procter being a (a) Member of the College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the [illegible] day of February at (c) the house of Mrs Pinkney 29 Blake St - York in the County of York separately from any other Medical Practitioner, personally examined Sarah Marshall Hodgson Widow of (d) West End Postmaster and that the said Sarah Marshall Hodgson is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) The Appearance is melancholic - She tells me that she has no wish of existing - I believe that she has a tendency to attempt her own life

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Procter

Place of Abode, 24 Petergate

Dated this 16th day of February One Thousand Eight Hundred and Sixty Eight

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the sixth day of February at (c) 29 Blake Street York in the county of the City of York separately from any other Medical Practitioner, personally examined Sarah Marshall Hodgson of (d) West End Postmaster - widow and that the said Sarah Marshall Hodgson is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

Great depression of spirits - ~~Does not~~ Mrs Pinkney answers to my questions - She takes no notice when spoken to & seems unwilling people are about to injure her

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S W North

Place of Abode, 31 Castlegate York

Dated this sixth day of February One Thousand Eight Hundred and Sixty eight

No 1127.

Georgina Hoornaill.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A Member by birthright.

2. Where was the place of birth of the patient?

Rochester — Kent —

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

None —

4. What appeared to be the disposition and character during the youth of the patient? were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Disposition always inclined to Obstinacy; very slow, but not perceptibly deficient in capacity. —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at Ackworth & Croydon Schools —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Never kept to any occupation — Never industrious — but always temperate & irreproachable in conduct —

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Never —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Never —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Unknown

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of ~~insanity~~ unsound mind?

First observed on leaving school

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

Standing for hours, indisposition to move or do anything — wanting to be always going to church — prayer meetings &c —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Same as above, with the addition of refusal to take her food for hours — & then eating 3 or 4 meals in one —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Neither

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Not except as mentioned above —

23. What are the habits of the patient as regards personal cleanliness and decorum?

Pretty good —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

None —

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Maria Horsmaile
Fountain Cottage
Dover —

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Georgiana Hornaill whom I last saw at Fountain Cottage Dover on the 25th day of 2 mo. month (a) a (*) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Georgiana Hornaill

Signed, *Name,* Maria G. Hornaill
Occupation (if any), —
Place of Abode, Fountain Cottage Dover
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this 29th Day of 2 mo. month
One Thousand Eight Hundred and Sixty 8 –

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Georgiana Hornaill
Sex and Age	Female – Age 23 yrs –
Married, Single, or Widowed	Single –
Condition of Life, and previous Occupation (if any)	At home with her Mother
Religious persuasion, as far as known	A Friend
Previous Place of Abode	Fountain Cottage Dover
Whether First Attack	Yes –
Age (if known) on First Attack	About 16 years –
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	About 7 years –
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Maria G Hornaill Fountain Cottage Dover.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Maria G Hornaill
Occupation (if any), —
Place of Abode, Fountain Cottages
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

Allen Duke

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, Allen Duke
being a (a) an M.D. of St Andrews and Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 25th day of Feby 1868
at (c) Fountain Cottage East Cliff Dover
in the County of Kent separately from any other Medical Practitioner,
personally examined Georgiana Hornail Spinster
of (d) the same place and that
the said Georgiana Hornail
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Fits of standing in her bedroom for hours with only her night dress & stockings on, for no reason whatever—won't dress herself altho' perfectly able to do so—

2. Other facts (if any) indicating Insanity communicated to me by others (g) her mother states she has fits of standing for 4 or 5 hours or longer—Will eat nothing the whole of day frequently and then eats enough for three meals at one time—

Signed, Name, Allen Duke

Place of Abode, 1 Cambridge Terrace

Dated this 29th day of February One Thousand Eight Hundred and Sixty eight

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

John Walter

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, John Walter
being a (a) Member of the College of Surgeons and Member of the Apothecaries' Company
and being in actual practice as a (b) Surgeon and apothecary
hereby certify, that I on the 29th day of Feb. 1868
at (c) Fountain Cottage, East Cliff Dover
in the county of Kent separately from any other Medical Practitioner,
personally examined Georgiana Hornail Spinster
of (d) the same place and that
the said Georgiana Hornail
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
Washing her head for 2 or 3 hours in the night having only her night dress on, reasoning her mother to ask her to go to bed &c Standing undressed, unable to account for her acts &c.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Washing her head for 2 or 3 hours in the night having only her night dress on, standing in the same posture for hours, not taking any food for hours then eating ravenously. Told me by her mother

Signed, Name, John Walter

Place of Abode, 1 St Martin's Place, Dover

Dated this 29th day of Feb. One Thousand Eight Hundred and Sixty eight

MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the 5th day of March 1868 at (c) the house of John Clark Huntington End York in the County of York separately from any other Medical Practitioner, personally examined Georgiana Hannah of (d) Fountain Cottage Poor Single Women and that the said Georgiana Hannah is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) A very violent expression in conversation is feeble & wasted person — She is ~~thin~~ pale unable & [illegible] for any reason for anything she has done — says that she was very sharp at work last some time Refused Victuals has been above ten years that she will not eat anything — that she is frequently very depressed & that she stands for long periods not knowing what to do — she frequently dies this all by myself & day — & wetted Bed at nights

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North

Place of Abode, 31 Castlegate York

Dated this 5th day of March One Thousand Eight Hundred and Sixty eight

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MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, being a (a) and being in actual practice as a (b) hereby certify, that I on the day of at (c) in the county of separately from any other Medical Practitioner, personally examined of (d) and that the said is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,*

Place of Abode,

Dated this day of One Thousand Eight Hundred and Sixty

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

(a) *Within one month previous to the date of the order.*
(b) *Lunatic, or an idiot, or a person of unsound mind.*

whom I last saw at
on the day of (a)
a (b) as a Patient into your House.

Subjoined is a Statement respecting the said

Signed, *Name,* _____
Occupation (if any), _____
Place of Abode, _____
Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of
One Thousand Eight Hundred and Sixty

To JOHN KITCHING, M.D.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length .....
Sex and Age .....
Married, Single, or Widowed .....
Condition of Life, and previous Occupation (if any).....
Religious persuasion, as far as known .....
Previous Place of Abode .....
Whether First Attack .....
Age (if known) on First Attack .....
When and where previously under Care and Treatment ....
Duration of existing Attack .....
Supposed Cause .....
Whether subject to Epilepsy .....
Whether Suicidal .....
Whether Dangerous to others .....
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners .....
Name and Address of Relative to whom Notice of Death to be sent.

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) _____
Occupation (if any), _____
Place of Abode, _____
Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

No 1128 - John Bennell.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Birthright Membership

2. Where was the place of birth of the patient? Houghton Conquest near Ampthill Beds

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? none

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? He was of a very lively disposition and of bright intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He received a good plain education at Friends Boarding Schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Of sober habits He was apprenticed to a Draper but afterwards turned his attention to Agriculture

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. never Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? no very particular bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? never any great change in pecuniary circumstances

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? He has at different times suffered from Erysipelas — d, in my opinion, from Cerebral Congestion —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? none

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? This, which is the first attack, has gradually developed itself during the last two months - but with variations - no cause except disease can be assigned for it. Two or 3 months previously he had a Hemiplegic seizure which was a good deal of Paralysis of the Tongue & Impaired Speech

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 67 or 68

15. What has been the duration of the present attack? He has been ill for four months – but no symptoms of mental disorder were manifest until 7 or 8 weeks since –

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? no intervals

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

Mistaking the hours of the night – persisting in getting up at one or two o'll in the morning – then delusions of various kinds – for instance that he was married – then that one of his servants was his child – attended with a measure of imbecility in all his conversation –

Errors in writing cheques – & in directing letters. –

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

What I have mentioned have been leading delusions – but latterly there have been a great variety arising from any incident that may have occurred, or any name that may have been mentioned –

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? He has struck at his attendants repeatedly, & has broken many windows & other articles –

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

For the most part he has taken his food with a good appetite. He has threatened to destroy himself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Correct. –

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. There does not appear now to be much wrong in his health. – The functions of the Bowels & Kidneys are duly performed – & he sleeps better than he did

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?

The medical treatment has varied according to his symptoms – when necessary, measures have been taken to secure ~~and~~ restraint – but there has been no employment of force

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

There are remissions, but at no particular periods. After these he is, for the most part, worse than before. –

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

for the present Bassett & Co accounts to be sent to their Bank at Newport Pagnel Bucks.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Bennell

whom I last saw at Sherrington near Newport Pagnel

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the second day of the present Month (a)

a (b) Lunatic as a Patient into your House.

Subjoined is a Statement respecting the said John Bennell

Signed, *Name,* Joseph Bennell

Occupation (if any), Farmer

Place of Abode, Hitchin Hertfordshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother of the Patient

Dated this Seventh Day of the fourth Month April 1868

One Thousand Eight Hundred and Sixty eight

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Bennell
Sex and Age	age 67 or 68
Married, Single, or Widowed	Single Man
Condition of Life, and previous Occupation (if any)	Farmer
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	~~Hi~~ Sherrington nr Newport
Whether First Attack	first
Age (if known) on First Attack	67 or 68
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	About two months.
Supposed Cause	Preceded by Paralysis
Whether subject to Epilepsy	No
Whether Suicidal	He has threatened self-destruction
Whether Dangerous to others	Sometimes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent.	Mr Joseph Bennell, Hitchin.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) George Osborn Rogers

Occupation (if any), Tuyson

Place of Abode, Newport Pagnel

Degree of Relationship (if any), or other circumstances of connexion with the Patient No connexion at all

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Osborn Rogers.
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon at Newport Pagnel.
hereby certify that I, on the Eighth day of April 1868
at (c) Sherrington, near Newport Pagnel
in the County of Buckingham separately from any other Medical Practitioner,
personally examined Mr John Bennell
of (d) Sherrington, Farmer and that
the said John Bennell
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherence in his conversation & sometimes indelicacy — delusions on many subjects as for instance that those about him were in league to poison or in some other way to destroy him — that he was married & had a family — that food was with-held from him.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Emma Bass × That He has destroyed many articles — broke large Windows — struck violently at his attendants — rushed out with scarcely any Clothing on — & a few days ago attempted to get into the Brook in his Garden —

× Emma Bass is Mr Bennell's Housekeeper

Signed, Name, George Osborn Rogers
Place of Abode, Newport Pagnel

Dated this Eighth day of April One Thousand Eight Hundred and Sixty eight.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Hammett Hailey
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 8th day of April 1868
at (c) Sherrington Bridge Sherrington
in the county of Bucks separately from any other Medical Practitioner,
personally examined Mr John Bennell (Farmer)
of (d) Sherrington Bridge Sherrington and that
the said John Bennell Farmer
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) ~~*Here state the facts.*~~

1. Facts indicating Insanity observed by myself (f)

~~[illegible]~~

(g) ~~*Here state the information, and from whom.*~~

2. ~~Other~~ facts (if any) indicating Insanity ~~communicated to me by others (g)~~ observed by myself
Incoherency of speech — disjointed ideas, strange delusions, mostly on subjects connected with the dead — violent & uncontrollable when contradicted

Signed, Name, Hammett Hailey
Place of Abode, Newport Pagnel

Dated this 8th day of April One Thousand Eight Hundred and Sixty Eight

No 1129 Wm Edmunds.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common, or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? *It is supposed to be hereditary*

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

first fault: unknown the latter supposed to be from an attack of small pox last summer

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? about 22 years of age

15. What has been the duration of the present attack? 6 or 7 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? three or four times — duration from 1 month to 12

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
yes from 4 to 7 years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
alternately low spirits & excitement

19. What were the first decided symptoms of mental aberration? Excitement

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested: is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Business anxieties appear to be the principal cause

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? In the present attack he may been more violent than he ever was before

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
has talked about suicide but has never made any attempt

23. What are the habits of the patient as regards personal cleanliness and decorum? good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
good bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Bethlem Hospital 7 years since also at York about the same time

26. What medical, or other, means have been used for the recovery of the patient, and with what effect?
Blister Back of Neck & Cold applications to head

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
The violence of the Paroxysms declining, lucid intervals very short

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Joseph Henry Rye Common Peckham

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 & 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from, and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Edmunds

whom I last saw at Peckham, Walking in Rye Lane

on the 2nd Inst. day of 4th Month 1868 (*)

a (*) Lunatic as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said William Edmunds &c

Signed, Name, Joseph Sterry

Occupation (if any),

Place of Abode, Rye Common Peckham

Degree of Relationship (if any), or other circumstances of connexion with the Patient } No Relationship

Dated this Seventh Day of Fourth Month

One Thousand Eight Hundred and Sixty Eight

To JOHN KITCHING, M.D.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length ..... William Edmunds

Sex and Age ..... Male 45 years

Married, Single, or Widowed ..... Married

Condition of Life, and previous Occupation (if any) ..... Tailor

Religious persuasion, as far as known ..... Society of Friends

Previous Place of Abode ..... Tottenham

Whether First Attack ..... No.

Age (if known) on First Attack ..... about 22 years of age

When and where previously under Care and Treatment .... Bethlem Hospital & Hyde Retreat

Duration of existing Attack ..... Eight or Nine days

Supposed Cause ..... Anxiety

Whether subject to Epilepsy ..... No

Whether Suicidal ..... ~~See answer 22~~ Has talked about suicide, but has never made any attempt

Whether Dangerous to others ..... yes during paroxysms

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... } No

Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners ..... }

Name and Address of Relative to whom Notice of Death to be sent. Wm Robinson Rye Lane Peckham }

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (*) Joseph Sterry

Occupation (if any),

Place of Abode, Rye Common Peckham

Degree of Relationship (if any), or other circumstances of connexion with the Patient } No Relationship

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, as the case may be, e.g.* —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) *Physician, surgeon, or apothecary, as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) *Lunatic, or an idiot, or a person of unsound mind.*

I, the undersigned, James D. Henwood being a (a) Physician & Surgeon, M.D. of Edinburgh and L.R.C.S. and being in actual practice as a (b) Physician & Surgeon hereby certify that I, on the twelfth day of April at (c) ~~the Forum, Peckham Rye~~ No Rye Lane, Peckham in the County of Surrey separately from any other Medical Practitioner, personally examined William Edmonds of (d) No Rye Lane, Peckham, Surrey — and that the said William Edmonds is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) great mental excitement threatening those around him, & calling them black Devils & talking in the most incoherent manner & spitting, & swearing at those around him

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, James D. Henwood
Place of Abode, 1 The Forum Camberwell

Dated this fifteenth day of April One Thousand Eight Hundred and Sixty eight—

MEDICAL CERTIFICATE—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, as the case may be.* —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) *Physician, surgeon, or apothecary, as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) *Lunatic, or an idiot, or a person of unsound mind.*

I, the undersigned, Richard Stokes, L.R.C.P. Lond. being a (a) Physician, M.R.C.S. Eng. and being in actual practice as a (b) as Surgeon hereby certify that I on the Twelfth day of April, 1868 at (c) Rye Lane, Peckham in the county of Surrey separately from any other Medical Practitioner, personally examined William Edmonds of (d) Rye Lane, Peckham, Surrey and that the said William Edmonds is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—,

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) I found him in bed and upon his being told to get up he refused he tore the clothes, and refused to get dressed & began talking, and only answered questions, when I first saw him by saying Leave me &c.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) I was told by his wife and ~~that~~ a Police Man that he had formed ~~the~~ delusions, as many times before that they should all be shot, and they were trying to do them [illegible] Common Law Court &c. &c.

Signed, Name, Richd Stokes
Place of Abode, Peckham Rye

Dated this twelfth day of April One Thousand Eight Hundred and Sixty eight

No 1130
Elizabeth Maltby.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 16th day of May 1868, of Elizabeth Maltby a Private Patient in Moat House, Tamworth to The Retreat, ~~House~~ York.

Given under our hands this 5th day of May in the year of Our Lord One Thousand Eight Hundred and Sixty eight

James Wilkes
[signature]
} Commissioners in Lunacy.

ORDER.

I,* Brough Maltby the undersigned having Authority to discharge Elizabeth Maltby a Private Patient in Moat House, Tamworth hereby order and direct that the said Elizabeth Maltby be removed therefrom to The Retreat, ~~House~~ York

Given under my hand this* 7th day of May. in the year of Our Lord One Thousand Eight Hundred and Sixty eight

(Signed) Brough Maltby.

Place of Abode Farndon Vicarage near Newark

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

1000 3 | 66—H & S
1734

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NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

was admitted into this (a) as a Private Patient, on the

Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(a) House or hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

_____

(c) Superintendent or proprietor of ——.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

Copy

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Elizabeth Maltby

whom I last saw at Southwell

on the truth day of August 1866 (a)

a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Elizabeth Maltby

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, *Name,* Brough Maltby

Occupation (if any), Vicar of Farndon

Place of Abode, Farndon Vicarage

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother.

Dated this truth Day of August

One Thousand Eight Hundred and Sixty six

To John Francis Woody

(c) Superintendent (d) of the Moat House Tamworth

(c) Proprietor or superintendent of ——.
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Elizabeth Maltby
Sex and Age	Female - 35 years -
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	None
Religious Persuasion, as far as known	The Church of England.
Previous Place of Abode	Southwell - Nottinghamshire
Whether First Attack	No -
Age (if known) on First Attack	32 years -
When and where previously under Care and Treatment	Never previously confined.
Duration of existing Attack	Six weeks
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Revd Brough Maltby - Farndon Vicarage near Newark.

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Brough Maltby

Occupation (if any), Vicar of Farndon

Place of Abode, Farndon Vicarage near Newark

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Henry Osborne being a (a) Member of the Royal College of Surgeons of England and a Licentiate of Apothecaries Company and being in actual practice as a (b) Surgeon and Apothecary hereby certify, that I, on the tenth day of August 1866 at (c) Bungage Green, Southwell Notts in the County of Nottingham separately from any other Medical Practitioner, personally examined Elizabeth Maltby of (d) Bungage Green Southwell Notts. and that the said Elizabeth Maltby is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) From her great fear of being injured by others — She thinks persons are in her room and intend to murder her. She hears noises and imagines she is conversing with persons who are not present — Her fears of injury are so great that she cannot sleep — and fancies persons are concealed in her room and under her bed when such is not the case —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her Sister Caroline Maltby states she is under the delusion that she is to be married to the Duke of Rutland, whom she has never seen in her life. She declares her Brother's Wife has murdered her youngest child and is in the Room secreted under the bed and will murder her. Her demeanour is totally different to what it was when in health —

Signed, *Name,* John Henry Osborne

Place of Abode, Southwell — Notts —

Dated this tenth day of August One Thousand Eight Hundred and Sixty six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Sharples being a (a) Member of the Royal College of Surgeons of England and a Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon & Apothecary hereby certify, that I on the 13th day of August 1866 at (c) the House of Mrs Harding, Lichfield Street Tamworth. in the County of Stafford separately from any other Medical Practitioner, personally examined Elizabeth Maltby of (d) the Green Southwell Notts. and that the said Elizabeth Maltby is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She states that she is in constant dread of personal injury and that she is constantly awoke at night by persons under or upon the Bed. She fancies that she is holding a conversation with persons in the room and is surprised that I do not hear her speak, when she has not uttered a syllable —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs Bramall informs me that she got up in the night in a state of great excitement saying that something very horrible had occurred in her own room and that she could not return to it —

Signed, *Name,* William Sharples

Place of Abode, Lichfield Street Tamworth —

Dated this 13th — day of August One Thousand Eight Hundred and Sixty six —

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No 1131.

Ann Sykes.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Anne Sykes
my house Reservoir Road Edgbaston
whom I last saw at Birmingham
on the Eighteenth day of fifth month (a)
a (b) person of unsound mind as a Patient in your House.
Subjoined is a statement respecting the said Anne Sykes

(a) Within one month previous to the date of the order.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Signed, *Name,* John Sykes
Occupation (if any), Hunter Merchant
Place of Abode, Reservoir Retreat Birmingham (Road not numbered)
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Brother

Dated this Eighteenth Day of fifth Month
One Thousand Eight Hundred and Sixty Eight

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Anne Sykes
Sex and Age	Female 43
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Spinster Housekeeping to sister
Religious persuasion, as far as known	Established Church
Previous Place of Abode	Holmfirth
Whether First Attack	not
Age (if known) on First Attack	abt 27
When and where previously under Care and Treatment	in 1852 at Wakefield County Asylum
Duration of existing Attack	abt 6 mos
Supposed Cause	grief at loss of sister
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	John Sykes Reservoir Retreat Birmingham

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Sykes
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind

I, the undersigned Robert Coane Roberts Jordan
being a (a) doctor of medicine of the University of London, Member of the College of Surgeons & Licentiate of the Apothecaries Company—
and being in actual practice as a (b) general practitioner,
hereby certify that I, on the Eighteenth day of May 1868
at (c) Reservoir retreat - Edgbaston (no number to house)—
in the County of Warwick - separately from any other Medical Practitioner,
personally examined Anne Sykes -
of (d) Reservoir retreat, Edgbaston. (late of Holme Firth) and that
the said Anne Sykes
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) - time I was conversing with her general restlessness of manner, as shewn by rocking to & fro all the evident depression of mind & short, quick hurried answers, & ignorance of the length of time since she left "the retreat" before—

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Communicated by Brother - John Sykes — { The thought that she is possessed by the devil & lost without hope of redemption —

Signed, *Name,* Robert, Coane, Roberts Jordan
Place of Abode, 35 Harborne road - Edgbaston.

Dated this 18th day of May One Thousand Eight Hundred and Sixty Eight //

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Slingsby Mann
being a (a) Member of the Royal College of Surgeons. and Licentiate of the Apothecaries Company
and being in actual practice as a (b) general practitioner
hereby certify, that I on the Eighteenth day of May 1868.
at (c) Reservoir Retreat - Edgbaston
in the county of Warwick separately from any other Medical Practitioner,
personally examined Anne Sykes
of (d) Reservoir Retreat - Edgbaston - (late of Holme Firth) and that
the said Anne Sykes
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She has no remembrance of any particular occupation within the last few weeks.
"She believes the present month to be June.
"She is quite uncertain about any statement she makes

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Communicated by Sister - Elizabeth Sykes — Fancying she is the Queen, and her Brother the king, and all about her an inferior beings.

Signed, *Name,* William Slingsby Mann
Place of Abode, 22 Broad Street Birmingham

Dated this 18th day of May One Thousand Eight Hundred and Sixty Eight.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

no

2. Where was the place of birth of the patient? Hudson

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

no

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

no

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

but little & mostly at home

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

[illegible]

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

no

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

various changes some disappointment

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

no

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Bilious headache

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

some little both parents having been so

Both parents were insane

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

disappointment [illegible] & [illegible] death [illegible]

Grief from disappointment, & then the same from sister's death.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

27 years

15. What has been the duration of the present attack? six months. recovery not quite complete

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

α. β.

α. once — β. seven months — γ. despondency & religious depression

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

complete lasting sixteen years.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

sleeplessness & great depression — always feels

19. What were the first decided symptoms of mental aberration?

always thinking she had committed some great crime —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Religious despair —

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

none whatever.

22. Has the patient shown any disposition to refuse food, or to injure herself, and if so, in what way?

none.

23. What are the habits of the patient as regards personal cleanliness and decorum?

correct in every way.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

in a general weak condition subject to headaches with vomiting —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Wakefield County asylum — 6 mo. 1852 Recovery Complete
York Retreat — 5 mo. 1857, 68 — very much improved.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

one week only elapsed since leaving Retreat

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

losses since return —
generally ~~always~~ depression but sometimes unusual excitement —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Sykes
Sheepcote St
Birmingham

No 1132.

Amelia Ann Robinson,

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Amelia Ann Robinson whom I last saw at South Street Chesterfield on the 20th day of July 1868. (a) a (b) person of unsound mind, as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Amelia Ann Robinson

Signed, Name, John Robinson
Occupation (if any), Watchmaker
Place of Abode, South St. Chesterfield
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this 20th Day of July
One Thousand Eight Hundred and Sixty eight

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Amelia Ann Robinson
Sex and Age	Female – Twenty eight.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Pursued a domestic life
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	South St. Chesterfield
Whether First Attack	First attack
Age (if known) on First Attack	Twenty eight.
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Three weeks
Supposed Cause	Visit to Chatsworth House
Whether subject to Epilepsy	Is said to have had two fits of epilepsy at School.
Whether Suicidal	No.
Whether Dangerous to others	Has as yet made no attack on any person or thing.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	John Robinson Chesterfield

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) John Robinson
Occupation (if any), Watchmaker
Place of Abode, South St. Chesterfield
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father

MEDICAL CERTIFICAFE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned Charles Stark being a (a) Doctor of Medicine of the University of London, Member of the Royal College of Physicians of London and being in actual practice as a (b) Physician hereby certify that I, on the twenty fifth day of July 1868 at (c) Bank Street, Chesterfield in the County of Derby separately from any other Medical Practitioner, personally examined Amelia Ann Robinson of (d) Bank Street, Chesterfield in the County of Derby and that the said Amelia Ann Robinson is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

That her general conduct is irrational sometimes being violent & ungovernable — sometimes manifesting a childish simplicity of perception with delusions

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her mother tells me that for six years she has secluded herself from society — that previous she has been all her life a reserved, secluded & odd person — has been very different to the members of her family

Signed, *Name,* Charles Stark

Place of Abode, Chesterfield

Dated this 25th day of July One Thousand Eight Hundred and Sixty eight

+ Is a member of the Society of Friends.

MEDICAL CERTIFICATE.—**Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned, Gratian Charles Barry Hart being a (a) Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify, that I on the Twentieth day of July 1868 at (c) South Street, Chesterfield in the county of Derby separately from any other Medical Practitioner, personally examined Amelia Ann Robinson of (d) South Street, Chesterfield and that the said Amelia Ann Robinson is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Childish in her ordinary conversation. Violent, fearful and excited when speaking to Dr of certain of her friends and attendants

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Has been very peculiar in conduct and avoiding the society of other persons, my informants are her father and mother.

Name of Informant?

Signed, *Name,* Gratian Charles Barry Hart

Place of Abode, Chesterfield

Dated this 20th day of July One Thousand Eight Hundred and Sixty Eight

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Not in membership. Mother a member

2. Where was the place of birth of the patient? South Street Chesterfield

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Likes other children until the age of twenty-one when she became retiring in her manner and fond of being alone.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The understanding and affections were cultivated early. She was taught at home until the age of twelve and for two years after her education was conducted at Friends School Rawden.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. To household duties at home.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Never been married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Always fond of reading.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Said by the Mistress of the School at Rawden to have two fits of epilepsy whilst there last none of any kind since.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Her cousin Rachael Williamson who died at the Retreat.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? The present the only attack. Came on while inspecting the interior of Chatsworth House the Seat of the Duke of Devonshire. Seemed to be particularly impressed by the painted ceilings there.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Eight and twenty.

15. What has been the duration of the present attack? Three weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? This the first attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Had disturbed sleep for two or three weeks previous to the attack. Health tolerably good. For some years past has been very retiring shutting herself from society.

19. What were the first decided symptoms of mental aberration? Her strange conduct at Chatsworth House — eyes constantly directed to the ceiling weeping. Sudden manifestation of fright at the appearance of a man.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. Impulsiveness — strong antipathies especially against father and mother. Says she has been to heaven and cheerfully hopes to go there finally and that her heavenly father comes to her every night and sits and reads with her.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Violent in expression at times — not destructive — has not attempted her own or any other person's life

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Takes food well.

23. What are the habits of the patient as regards personal cleanliness and decorum? Quite proper.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Has taken food well and has appeared to be in good bodily health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? Has been under the care of Dr Black. For the first week appeared to be much better from the treatment then relapsed.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? For a fortnight has appeared to be stationary; no really lucid intervals. Remissions and exacerbations — no regular order of return of exacerbations; but when present worse at night.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Robinson, South Street Chesterfield

No 1133.

Walker Woodward.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Walker Woodward whom I last saw at 40 Chepstow Place, Bayswater on the second day of Seventh Month 1868 (a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind. a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Walker Woodward

Signed, *Name,* Lyall Neighbour

Occupation (if any), Merchant

Place of Abode, 127 High Holborn

Degree of Relationship (if any), or other circumstances of connexion with the Patient First Cousin

Dated this 16th Day of July One Thousand Eight Hundred and Sixty Eight

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Walker Woodward
Sex and Age	Male, Thirty-nine years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	of no occupation
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	40, Chepstow Place, Bayswater.
Whether First Attack	Symptoms have been growing increasing for many years - from Early life
Age (if known) on First Attack	
When and where previously under Care and Treatment	Not under proper treatment
Duration of existing Attack	of long standing - precise time not known.
Supposed Cause	Feeble health melancholy
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not found Lunatic by Inquisition
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Lyall Neighbour

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Lyall Neighbour

Occupation (if any), Merchant

Place of Abode, High Holborn, London

Degree of Relationship (if any), or other circumstance of connexion with the Patient First Cousin

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned William Mac Culloch
being a (a) Member of Royal College of Surgeons of London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Fourteenth day of July 1868
at (c) 40 Chepstow Place — Kensington
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Mr. Walter Woodward
of (d) 40 Chepstow place Kensington and that
the said Walter Woodward of no occupation
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) That he absents himself from his Family, talks incoherently, & labours under delusion that he is in danger of his neighbours, declares himself to be the subject of persecution by his neighbours into Galvanic Chair — which he is in dread of,

2. Other facts (if any) indicating Insanity communicated to me by others (g)
many years left this town for several years in consequence of dread of such attacks

Signed, *Name,* Wm Culpepper
Place of Abode, 1 Brunswick Terrace Kensington
Dated this 14th day of July One Thousand Eight Hundred and Sixty 8

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, George Spencer
being a (a) Member of the Royal College of Surgeons & Licentiate of the Apothecaries Company
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify, that I on the Sixteenth day of July 1868
at (c) 40 Chepstow Place Kensington
in the county of Middlesex separately from any other Medical Practitioner,
personally examined Mr. Walter Woodward of no occupation
of (d) 40 Chepstow Place Kensington and that
the said Mr. Walter Woodward
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) that he absents himself from his Family talks incoherently & labours under delusion that his neighbours perform acts of violence towards him & pleading & otherwise annoying him

2. Other facts (if any) indicating Insanity communicated to me by others (g) Dr. Culpepper.
Name of informant
that he confines himself to his room & secludes himself from all society, is at times violent, but generally in a state of Melancholy

Signed, *Name,* Geo Spencer
Place of Abode, 8 Kensington Park Road
Dated this 16th day of July One Thousand Eight Hundred and Sixty 8

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (~~or she~~) in any way connected with the Society of Friends?

In Membership

2. Where was the place of birth of the patient?

Kensington, near London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Mental & Physical Condition – feeble

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Delicate Health – not able to remain at School for any length of time —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

this information obtained from his mother previous to her death

Very little education on account of headaches & general feeble health

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation – Habits, regular & temperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

He has not been exposed to ~~any~~ reverse of any kind

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

as stated above

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Yes on Fathers side

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No change, must the Last few years Last

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Indifferently by various subjects
can ascertain as he holds no communication with any one

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

He is not prone to acts of violence, but maintains great excitement when his Brother prevents him from having too much strong liquors

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He has not taken meat for several year, lives chiefly on liquid nourishment

23. What are the habits of the patient as regards personal cleanliness and decorum?

Not correct as regard cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Bodily health very feeble, but has not suffered from any Physical complaint, For several years past

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Has never been under any Restraint

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

No means can be used for his recovery

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary Melancholia

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Geo. L. Neighbour
127 High Holborn
London. W.C

No. 1134.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 25th day of July 1868, of Henry Clothier a Private Patient in Bailbrook House, Batheaston, Bath, to The Retreat, ~~House~~ York.

Given under our hands this 14th day of July in the year of Our Lord One Thousand Eight Hundred and Sixty Eight

R W Lubwedge
John D Chaton
} Commissioners in Lunacy.

ORDER.

I,* James Clothier junr. the undersigned having Authority to discharge Henry Clothier a Private Patient in Bailbrook House, Batheaston, Bath hereby order and direct that the said Henry Clothier be removed therefrom to The Retreat, ~~House~~ York

Given under my hand this* 16th day of July in the year of Our Lord One Thousand Eight Hundred and Sixty Eight

To be filled up & signed by Mr. Jas Clothier junr

(Signed) James Clothier Junr

Place of Abode Street Somerset

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission;
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient;
3. If there be no Husband or Wife, then by the Patient's *Father*;
4. If there be no Father, then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

1000 3 | 66—T & S
1751

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No 1134.

Copy of Rder and certificates —

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

Henry Clothier.

I hereby give you Notice, That

.

was admitted into this (a) as a Private Patient, on the

. Day of 186 , and I

hereby transmit a Copy of the Order and Medical Certificates on which he was received (b)

(a) House or hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

(c) Superintendent or proprietor of ——.

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Henry Clothier

whom I last saw at Bradford

(a) *Within one month previous to the date of the order.*

on the first ——— day of April ——— (a)

(b) *Lunatic, or an idiot, or person of unsound mind.*

a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said H. Clothier

Signed, *Name,* James Clothier Just

Occupation (if any), Grazier

Place of Abode Street

Degree of Relationship (if any), or other circumstances of connection with the Patient Brother

Dated this first ——— day of April

One Thousand Eight Hundred and Sixty eight

To Dr Terry

(c) *Proprietor or superintendent of.*

(c) Baildon (d)

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Henry Clothier
Sex and Age	Thirty one
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Reaper
Religious Persuasion, as far as known	Friend
Previous Place of Abode	Street
Whether First Attack	yes
Age (if known) on First Attack	
When and where previously under Care and Treatment	
Duration of existing Attack	Two months
Supposed Cause	
Whether subject to Epilepsy	no
Whether Suicidal	yes
Whether Dangerous to others	yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	James Clothier — Street

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) James Clothier Just

Occupation (if any), ———

Place of Abode, ———

Degree of Relationship (if any), or other circumstances of connexion with the Patient ———

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Arthur Adye
being a (*a*) Surgeon - M.R.C.S.E.
and being in actual practice as a (*b*) Surgeon
hereby certify, that I, on the first day of April 1868
at (*c*) the Police Office - Bradford on Avon
in the County of Wilts separately from any other Medical Practitioner,
personally examined Henry Clothier
of (*d*) Street - Somerset - A Draper and that
the said Henry Clothier
is a (*e*) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (*f*) The general appearance and wildness of expression. The great disturbance of the circulation and the necessity of restraint - as he endeavoured to injure himself and was obliged to have a straitwaistcoat, and was incoherent - I fear it is a case of Delirium tremens

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*g*) Mr Maggs. Police inspector met him in the road from Holt to Bradford - He appeared strange in his manner - I asked him to go with me, and then he ran away from me. I called assistance and secured him, and he became violent - shouting dancing and gesticulating -

Signed, *Name,* Arthur Adye Surgeon -

Place of Abode, Bradford on Avon -

Dated this first day of April One Thousand Eight Hundred and Sixty eight -

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Nathaniel Jarvis Highmore
being a (*a*) Doctor of Medicine (St Andrews)
and being in actual practice as a (*b*) Physician
hereby certify, that I on the first day of April
at (*c*) the Police Station. Bradford on Avon
in the County of Wilts separately from any other Medical Practitioner,
personally examined Henry Clothier
of (*d*) Street A. Draper and that
the said Henry Clothier
is a (*e*) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (*f*) Extreme and irrational despondency. Says he is brought here to be burnt - That he deserves to be burnt - That he is obliged to commit suicide, and intends doing so - So at times incoherent, and unable to speak reasonably with respect to dates and recent occurrences

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*g*) By Mr Maggs inspector of Police at Bradford - That since he has been in his charge he has been most irrational in his conduct singing, shouting & dancing without cause - That he has been violent in the extreme, attempting to injure himself and others -

Signed, *Name,* N Jarvis Highmore M.D. -

Place of Abode, Bradford on Avon

Dated this first day of April One Thousand Eight Hundred and Sixty eight -

The above is a correct copy of the order and medical certificates on which Henry Clothier was received into Barbrook House on the 1st day of April 1868. [illegible]

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No 1135.

James Hunt Payne.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Hunt Payne whom I last saw at Ifield on the 26th day of 7th month 1868 (a) as a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said James Hunt Payne

Signed, Name, John Cheal

Occupation (if any), Farmer

Place of Abode, Longfield Crawley Sussex

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Friend

Dated this 26th Day of 7th month 1868

One Thousand Eight Hundred and Sixty eight

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	James Hunt Payne
Sex and Age	Sixty two
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Independent
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Red Hill
Whether First Attack	Yes
Age (if known) on First Attack	About 15 years.
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	About 40 years.
Supposed Cause	Defective from infancy
Whether subject to Epilepsy	No
Whether Suicidal	Not
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Elizabeth Payne Rebecca Fox Bewsbury

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) John Cheal

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Timothy Hy. Maytue being a (a) ~~Surgeon~~ Member of the Roy. Collge of Surgeons Surgeon and being in actual practice as a (b) Surgeon hereby certify that I, on the Twenty first day of July 1868 at (c) Ifield in the County of Sussex separately from any other Medical Practitioner, personally examined James Hunt Payne of (d) Ifield and that the said James Hunt Payne is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f)
His manner and conversation are quite imbecile and eccentric

2. Other facts (if any) indicating Insanity communicated to me by others (g) Keeper of the ~~Asylum~~ House
He is stated by his attendant to be very uncleanly habits – in his bedroom and elsewhere – He is also in the habit of ~~exposing himself~~ indecently exposing himself in public

Signed, Name, Timothy Hy Maytue
Place of Abode, Crawley, Sussex

Dated this Twenty first day of July One Thousand Eight Hundred and Sixty Eight

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Chassall being a (a) Doctor of Medicine of St Andrews & Licentiate of the Society of Apothecaries, London. and being in actual practice as a (b) Physician & Apothecary hereby certify, that I on the 22nd day of July 1868. at (c) Ifield in the county of Sussex separately from any other Medical Practitioner, personally examined James Hunt Payne of (d) Ifield, and that the said James Hunt Payne is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f)
His manner & habit is dirty. his conversation is of a mixed character, religious, immoral, often incoherent. has very eccentric ideas. Was illusions, & speaks of Angels visiting him.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
His attendant Thomas Knight in the house speak of his extremely dirty habits. he is constantly talking. giving most exaggerated descriptions of things & persons. & is said to have exposed himself indecently.

Signed, Name, William Chassall
Place of Abode, Horley Surrey

Dated this 22nd day of July One Thousand Eight Hundred and Sixty eight.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She is a member by birthright

2. Where was the place of birth of the patient? West square. Southwark

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Of unsound mind from Infancy

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Generally of mild disposition & character mark'd by eccentricity and decided peculiarity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Literary instruction given at Ackworth School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

His unhealthy would not allow of occupation His habits temperate except in food

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Never Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No not has his conduct ever exhibited strong bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

a paralytic fit about the age of 15 years

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

None

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Not any

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Not any

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Untidy

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

None

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder has increased of late at uncertain times

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Cheal of Crawley &c

Thos Ashby of Croydon

No 1136

Rocklei[illegible]e Follett.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

a member by birthright

2. Where was the place of birth of the patient? Bridgewater or a neighbouring village — S. Brent

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

nothing very marked

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

occasional tendency to fits of obstinacy — Natural understanding not above mediocrity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

a fair amount of Parental care in this respect — a limited amount of literary instruction at a public school only

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Employed in general Shop in the country; Of temperate habits and with some exception in private, regular in his conduct during youth and at more advanced age without exception

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

married twenty six years since at the age of 33 years
has had no family

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Has been engaged in business more or less from the age of 14 years until 1863 since that year only occasionally

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Has never been very successful in business and has twice retired after serious losses, the last ending in bankruptcy. The deficiency has ultimately been nearly liquidated

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No —

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Nothing very serious in the way of bodily illness or infirmity, but has had one serious accident from the fall of a horse by which he was thrown with some violence falling on his head some 30 years since

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

None of his relatives have been under Medical treatment that we are aware of —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Losses in business and anxiety respecting pecuniary affairs accompanied with severe reflections on his own conduct as to failure in religious duties and business engagements

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

No very decided symptoms until the present year (The 59th of his age)

15. What has been the duration of the present attack?

About one month but not very decidedly until the last ten days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first indications of unsoundness about five years since indicated by fits of despondency — For the last five years his bodily & mental health has been quite as good as usual

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

This last and only very serious attack was preceded by elevation of spirits and strong feelings of antipathy to some of his wives relatives apparently without foundation on careful investigation being made by disinterested parties

19. What were the first decided symptoms of mental aberration?

By loss of memory and rapid failure of mental powers with disposition to despondency

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Chiefly by aberration of mind and severe reflections on his Religious deficiencies —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

For the last week indisposition to take sufficient food

23. What are the habits of the patient as regards personal cleanliness and decorum?

Until within the last few days neat & cleanly with the recent exception alluded to in the Medical certificates

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Health generally good but for the last few days suffering from constipation

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Only by attention to bodily health and removal from home on the fourth of eighth Month

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be making daily progress

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Rouckleiffe Follett

whom I last saw at Portishead

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the eigth day of eighth month 1868 (a)

a (b) Person of Unsound Mind as a Patient in your House.

Subjoined is a statement respecting the said Rouckleiffe Follett

Signed, *Name,* Richard Kidd

Occupation (if any), Machine Sawyer

Place of Abode, Bristol

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Dated this ninth Day of eighth month 1868

One Thousand Eight Hundred and Sixty eight

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Rouckleiffe Follett
Sex and Age	Male fifty eight
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	out of business mealing trade
Religious persuasion, as far as known	a member of the Society of Friends
Previous Place of Abode	46 S. Michaels Hill Bristol
Whether First Attack	First attack requiring Medical treatment
Age (if known) on First Attack	as above 59th year
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	About two weeks
Supposed Cause	
Whether subject to Epilepsy	no
Whether Suicidal	not that we are aware of
Whether Dangerous to others	not at present
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	See medical certificates
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Richard Kidd 12 Horfield Rd. S. Michaels Bristol

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Mary Follett

Occupation (if any),

Place of Abode, 12 Horfield Road st

Degree of Relationship (if any), or other circumstance of connexion with the Patient Wife

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

No 12

I, the undersigned Augustin Prichard
being a (a) Fellow of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the third day of August 1868
at (c) 12 Horfield Road - Bristol
in the County of Gloucester separately from any other Medical Practitioner,
personally examined Rouckleiffe Follett
of (d) 46. St Michaels Hill - Bristol - Miller and that
the said Rouckleiffe Follett
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is vacant - and silent (different from his usual state) He states that he is lost and that everything he reads condemns him & that his state is hopeless He says he has lost his memory.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
He has had a period of restlessness & excitement & violence before I saw him. 2 days ago he tried to go out at night, undressed: (from his brother in law Richard Kidd & wife)

Signed, *Name,* Augustin Prichard
Place of Abode, Chesterfield Place Clifton

Dated this third day of August One Thousand Eight Hundred and Sixty eight.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

No 12

I, the undersigned, Josiah Pritchard
being a (a) Member of the Royal College of Surgeons.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the third day of August 1868.
at (c) 12 Horfield Road, Bristol
in the county of Gloucester separately from any other Medical Practitioner,
personally examined Rouckleiffe Follett
of (d) 46 St Michaels Hill, Bristol - Miller. and that
the said Rouckleiffe Follett
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) His vacant appearance - constantly saying he is lost, and every thing he reads condemns him - he states that every one he meets in the streets ~~knows~~ looks and stares at him because they know what is the mather with him - he could not go into tea because he was not good enough to meet any one, even his Sister

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
He went down stairs in his night clothes 2 nights ago - is constantly wandering about - is very silent - today refuses his food - (his brother in law* & wife)

*Mr Richard Kidd

Signed, *Name,* Josiah Pritchard
Place of Abode, 3, Berkeley Crescent, Bristol

Dated this third day of August One Thousand Eight Hundred and Sixty eight.

No. 1137.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 12th day of September 1868, of Eleanor Whitehead a Private Patient in Ticehurst Asylum House to The Friend's Retreat, Wr. York House,

Given under our hands this 12th day of August in the year of Our Lord One Thousand Eight Hundred and Sixty-eight

W. Glamphill
Robert Naidne
} Commissioners in Lunacy.

ORDER.

I,* Sarah Ann Lucas the undersigned having Authority to discharge Eleanor Whitehead a Private Patient in Ticehurst Asylum House, hereby order and direct that the said Eleanor Whitehead be removed therefrom to The Friend's Retreat, Wr. York House.

Given under my hand this* 13th day of August in the year of Our Lord One Thousand Eight Hundred and Sixty 8

(Signed) Sarah Ann Lucas

Place of Abode 43 Buckingham Place Brighton

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

1000 3 | 66—H & S
1784

333

No 1137. Eleanr Whitehead.

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

•

was admitted into this (a) as a Private Patient, on the

. Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(a) House or Hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

_____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Mrs Eleanor Whitehead

whom I last saw at No 1 Clifton Road, Brighton

on the 13th day of February 1867 (a)

a (b) person of unsound mind as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said Eleanor Whitehead

Signed, *Name,* Sarah Ann Lucas

Occupation (if any), _____

Place of Abode 43 Buckingham Place, Brighton

Degree of Relationship (if any), or other circumstances of connection with the Patient Niece

Dated this 13th day of February

One Thousand Eight Hundred and Sixty Seven.

To Dr Saml Newington

(c) Proprietor of (d) Ticehurst Asylum Durst Green Sussex.

(c) *Proprietor or superintendent of.*

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Eleanor Whitehead
Sex and Age	Female - 82 on the 18th Feby 1866
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	27 Clifton Terrace, Brighton (formerly of Warwick)
Whether First Attack	First attack
Age (if known) on First Attack	Eighty two.
When and where previously under Care and Treatment	Never before under care
Duration of existing Attack	First symptoms in June 1866, but rapidly increasing the last two months.
Supposed Cause	Severe illness.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Only by Medical Certificate
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Saml N. Lucas Esqre 43 Buckingham Place, Brighton

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Sarah Ann Lucas

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8 10. 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Tatham
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) general practitioner
hereby certify, that I, on the thirteenth day of Feby 1867
at (c) No 1 Clifton Road, Brighton
in the County of Sussex separately from any other Medical Practitioner,
personally examined Ellen Eleanor Whitehead
of (d) No 1 Clifton Road, Brighton, a widow and that
the said Ellen Eleanor Whitehead
is a (e) of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*
1. Facts indicating Insanity observed by myself (f) She asserts that last night there was a fire close to her house, that there were crowds of persons in the Street opposite her house last night, that there were horsemen galloping to & fro and that the crowd proceeded to attack one Mahomed a Pedlar in this town whose head they battered and mangled & thus killed him - besides this many other absurd stories.

(g) *Here state the information, and from whom.*
2. Other facts (if any) indicating Insanity communicated to me by others (g) Mary Ann Baldwin an old & trusty servant states that day & night she constantly imagines occurances similar to the above, & particularly alludes to annoyances from her neighbours who never have any intercourse with her. Her relations tell me she writes to persons who she does not know in most extravagant terms - these letters may be seen.

Signed, *Name,* George Tatham

Place of Abode, 46 Old Steine - Brighton

Dated this 13th day of February One Thousand Eight Hundred and Sixty Seven.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Macrae
being a (a) Member of the Royal College of Surgeons of Edinburgh
and being in actual practice as a (b) general practitioner
hereby certify, that I, on the thirteenth day of February
at (c) No 1 Clifton Road, Brighton
in the County of Sussex separately from any other Medical Practitioner,
personally examined Ellen Eleanor Whitehead
of (d) No 1 Clifton Road, Brighton and that
the said Ellen Eleanor Whitehead
is a (e) of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*
1. Facts indicating Insanity observed by myself (f) She says she is constantly annoyed by crowds of people threatening to take her off by force - that four different times a Cab has been driven up to her house about six in the morning for the purpose of taking her away, but she has been protected by friends - that a gentleman of the name of Mahomed was killed in front of her house by the ruffians outside - that the cries of several others were ordered to be either drowned or "put under ground" & that most screams & those who were drowned were heard kneeling.

(g) *Here state the information, and from whom.*
2. Other facts (if any) indicating Insanity communicated to me by others (g) Elizabeth Webb in attendance on Ellen Whitehead during the last three weeks says that by day & night she is in constant dread of being taken away - that she clings to her for protection - begs her to lie down by her in bed for security, and that whilst these conditions are present She seems in the greatest terror and is in a bath of perspiration.

Signed, *Name,* John Macrae

Place of Abode, High St - Lewes.

Dated this thirteenth day of February One Thousand Eight Hundred and Sixty Seven.

I Certify that the within is a
Correct Copy of the Order, Statement
and Certificates on which Mrs
Eleanor Whitehead was admitted into
the Tiechurst Asylum.

Proprietor
Samuel Kennington

№ 1138.
Frances Yeardley.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Frances Yeardley whom I last saw at 17 Broadfield Terrace, Rochdale on the sixth day of the Tenth Month — (a) 1868. a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Frances Yeardley

Signed, *Name,* John Yeardley
Occupation (if any), not in Business
Place of Abode, Albert Terrace, 181 Drake Street, Rochdale.
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Brother

Dated this Sixth Day of the Tenth Month One Thousand Eight Hundred and Sixty Eight.

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Frances Yeardley
Sex and Age	Female — age 57 next birthday 11mo: 10th.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Born deaf & dumb — and dependant on her friends.
Religious persuasion, as far as known	The Society of Friends
Previous Place of Abode	17 Broadfield Terrace, Rochdale
Whether First Attack	Not the first attack, but never placed under care before —
Age (if known) on First Attack	53 years —
When and where previously under Care and Treatment	Never —
Duration of existing Attack	3 weeks —
Supposed Cause	nothing particular — except after Blindness came on —
Whether subject to Epilepsy	never —
Whether Suicidal	never —
Whether Dangerous to others	No —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No —
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None —
Name and Address of Relative to whom Notice of Death to be sent	John Yeardley — of Rochdale —

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Yeardley
Occupation (if any), out of Business
Place of Abode, Albert Terrace 181 Drake St. Rochdale
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind

I, the undersigned William Stanwell
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 6th day of October
at (c) 17 Broadfield Terrace Rochdale
in the County of Lancaster separately from any other Medical Practitioner,
personally examined Frances Geardley
of (d) Broadfield Terrace, Rochdale and that
the said Frances Geardley
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Deaf, dumb & nearly blind she has a wild & excited look evidently dreads look touched & when touched becomes noisy & violent — She attempted in my presence to stab her sister —

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by ~~others~~ (g) Sarah Thistlethwaite — Wanders about restless at night — Expresses by signs to her sister that some one is in the room to rob her & that clothes &c have been stolen — So violent when contradicted

Signed, *Name,* W Stanwell
Place of Abode, Rochdale

Dated this Sixth day of October One Thousand Eight Hundred and Sixty Eight —

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Hylotley March
being a (a) Doctor of Medicine of the University of London & Member of the Royal College of Surgeons
and being in actual practice as a (b) Physician & Surgeon
hereby certify, that I, on the Sixth day of October 1868
at (c) 17 Broadfield Terrace Rochdale
in the county of Lancashire separately from any other Medical Practitioner,
personally examined Frances Geardley
of (d) Broadfield Terrace Rochdale and that
the said Frances Geardley
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) extreme violence & irritability when opposed — & when attempts are made to control her.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by ~~others~~ (g) John Geardley and Sarah Thistlethwaite — Suspicions of robbery — Rambles about the house at night Afraid, always, of fire — and of dangers in general Communicated by her sister & brother

Signed, *Name,* Hylotley March M.D.
Place of Abode, Rochdale

Dated this 6th day of October One Thousand Eight ~~68~~.
Hundred and Sixty eight.

No 1138.
Frances Yeardley

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?
a Member by birthright

2. Where was the place of birth of the patient? — Barnsley — Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? — She was born deaf and dumb

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
She was rather weakly in Childhood but very quick of perception —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She had a liberal education at the Deaf & Dumb Institution at Birmingham —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Well domesticated — and generally industrious, with her needle — scrupulously temperate — all her life.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
never married —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
nothing particular — but fond of reading —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
Always dependant on her friends. —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? — never

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? She had a severe attack of Rheumatick fever when about 10 years of age — In 1859. Blindness came on from Cataract. —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
After blindness came on, she could not employ herself interestingly as heretofore & her mind became morbid by constantly dwelling on one subject —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? — 53 years —

15. What has been the duration of the present attack? — 3 weeks —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? — The attacks have been generally been of two or three weeks duration —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Yes — She was kind and amiable & affectionate — The last period is a year —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Her health became affected about 10 years ago and appeared declining — previous to her sight failing her — for several Months

19. What were the first decided symptoms of mental aberration? — fears of fire at night and robbery — Wandering about in the night unsettled — very disturbing in opening and shutting her bed-room door.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. —
Fear of fire and robbery and imaginary dangers — She says by signs, that men and boys — climb over the Court walls and enter her Bedroom at midnight and robbed her drawers — altho' they were kept constantly locked —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Has been violent in striking when opposed

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Sometimes for days together, she has obstinately refused to take her food —

23. What are the habits of the patient as regards personal cleanliness and decorum?
Scrupulously clean in her habits —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. — Her general health has been good the past year — at present she has a little eruption on her legs — from her sedentary life — want of regular exercise — she has a small rupture and obliged to wear a truss. —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. — Never —

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
She has a strong objection to medicine or medical treatment — when prevailed on to take anything she has been treated homeopathically —

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
The delusions appear to be stronger and the excitement more frequent — when she is calm and tranquil in her mind she enjoys reading her Books of raised Type for the Blind —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Yeardley
Albert Terrace
181 Drake Street
Rochdale.

No 1139.

Mary Stones

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Stones

whom I last saw at Woodhouse

on the Eighteenth day of Eleventh Month 1868 (a)

a (b) Person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Mary Stones

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, Name, Peter France

Occupation (if any), Farmer

Occupation or no occupation

Place of Abode, Woodhouse near Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient } X New Relation

Overseer of Woodhouse Meeting

Dated this 18th Day of the 11th Month

One Thousand Eight Hundred and Sixty Eight

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Mary Stones
Sex and Age	Female. Age not known
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Straw Maker & Domestic duties
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Woodhouse
Whether First Attack	First Attack
Age (if known) on First Attack	Unknown
When and where previously under Care and Treatment	Not any where
Duration of existing Attack	Unknown
Supposed Cause	Unknown
Whether subject to Epilepsy	Not
Whether Suicidal	Not
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	William Bingham, Chesterfield Grocer

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) Peter France

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind

I, the undersigned William Thomas being a (a) Licentiate of the Royal College of Physicians & Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the 15th day of November at (c) Woodhouse in Westbury House Lane in the County of York separately from any other Medical Practitioner, personally examined Mary Jones without occupation and that of (d) Woodhouse the said Mary Jones is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f) The Patient was this afternoon Violent and is also speaking a heavy deceitful account Imputative of Command, and is also Refusing to Eat

2. Other facts (if any) indicating Insanity communicated to me by others (g) Informed by the Husband of the Patient and others

Signed, *Name,* William Thomas
Place of Abode, 17 Beverley Street
Dated this 15th day of November One Thousand Eight Hundred and Sixty eight

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William James Lake being a (a) Member of Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify, that I on the 16th day of November at (c) Woodhouse in the High Street in the county of York separately from any other Medical Practitioner, personally examined Mary Jones of (d) Woodhouse without occupation and that the said Mary Jones is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f) Frequent incoherency of conduct, and speak - appearing to be under continual apprehension that some one is plotting evil against her

2. Other facts (if any) indicating Insanity communicated to me by others (g) Answering strangers in the Street inquiring if they have heard anything against Mary Jones &c &c Information

Signed, *Name,* Wm James Lake
Place of Abode, Dunsworth Woodhouse
Dated this 16th day of November One Thousand Eight Hundred and Sixty eight

No 1139.

Mary Stones.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Is a Member from the Society by Convincement. Her Friends were connected with it.

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Dress maker, temperate and regular habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Kept School for Several years.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Mother was eccentric

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

having no County or employment

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Being gradually
increasing for the last 4 or 5 years

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

Irregularity of conduct

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Her subject she is insane more particularly
upon is the ~~upon~~ opinion that some parties are plotting against her

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Not any

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Not any

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No —

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Not any means used as yet —

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Gradually increasing —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Peter France
Woodhouse
Nr Sheffield

No 1140.

Sarah Cole.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Cole whom I last saw at Pickering on the twenty fourth day of December 1868 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Sarah Cole

Signed, *Name,* E. Cole

Occupation (if any), None

Place of Abode, Pickering

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister.

Dated this 24th Day of December One Thousand Eight Hundred and Sixty eight

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Cole
Sex and Age	Female - 51 yr
Married, Single, or Widowed	Single -
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Pickering -
Whether First Attack	Third -
Age (if known) on First Attack	40 yrs
When and where previously under Care and Treatment	Bootham County Asylum and in private asylum at Acomb -
Duration of existing Attack	Three or four months -
Supposed Cause	Not known -
Whether subject to Epilepsy	No -
Whether Suicidal	Yes. Has made one attempt at
Whether Dangerous to others	No. self destruction -
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Miss Eliza Cole Pickering -

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) W. Scholefield

Occupation (if any), MD

Place of Abode, Pickering

Degree of Relationship (if any), or other circumstance of connexion with the Patient Usual Medical Attendant -

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Dowson
being a (a) Member of the Royal College of Physicians of London
and being in actual practice as a (b) physician
hereby certify that I, on the twenty third day of December, 1868,
at (c) Pickering at the house of Eliza Cole, Hallgarth
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Cole
of (d) Hall Garth, Pickering, Gentlewoman and that
the said Sarah Cole
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Distress of mind without any apparent cause: She says I am so distressed I cannot rest by night or day — I can do nothing I am so miserable

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I learn from her mother that she says she has many a pelgrim lord no clothes — wishes for death — took something in the hope it would choke her

Signed, Name, John Dowson,
Place of Abode, Whitby
Dated this 23d day of December One Thousand Eight
Hundred and Sixty Eight.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Harrison Walker
being a (a) duly qualified Surgeon & Physician & a member of the Royal College of Surgeons London & a Licentiate of the Royal College of Physicians Edinburgh and being in actual practice as a (b) General Practitioner in Medicine
hereby certify, that I on the Twenty second day of December 1868
at (c) Hall Garth, Pickering
in the county of York separately from any other Medical Practitioner,
personally examined Sarah Cole
of (d) Hall Garth Pickering Gentlewoman and that
the said Sarah Cole
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
I attended Miss Sarah Cole on the 2nd December/68 in consequence of her having taken an Embrocation with the intention of injuring or destroying herself & She told me She had not taken it by mistake She is in a very distressing state of mind fears something dreadful about to happen to her but can give no reason why

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I have been informed by her attendants that She says She has no clothes, is sleepless and occasionally incoherent. His information was given to me by Dr Scholefield and also by the sister Mary a Wandsford

Signed, Name, John Harrison Walker M.R.C.S. Eng. &c.
Place of Abode, Pickering
Dated this 23rd day of December One Thousand Eight
Hundred and Sixty eight

Qualification

Give name of Informant

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No 1140.

Sarah Cole.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No –

2. Where was the place of birth of the patient?

Limington near Pulteney

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Always specially quiet reserved and timid –

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

See above. No precocity: rather the reverse. –

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No –

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No accupation except household work. Well conducted, very industrious. Have been told that she has tried to find relief from her distress by alcohol –

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No. Has lost all her brothers by death. Her sister is an invalid. She has spent all her life among strangers –

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Had Rheumatism some when young –

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Yes. Mother was insane and suicidal

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

I have been informed that an "affair of the affections" led to her first attack. There is also hereditary tendency with a life spent in the sick room. She has lost four or five brothers. –

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

When about 20. She was not then put under restraint and I presume was not violent.

15. What has been the duration of the present attack?

She has been going wrong for the last six months, but has been unmistakably unsound for three months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First when about 20 — was Nature not known
Second when about 40 — Duration 6 or 8 months — Melancholia
Third — 43 — — 1 year — Do —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

There were intervals of complete sanity between the above dates. See also answer 15.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Depression, change of temper: duplexness some dyspepsia: for two or three months

19. What were the first decided symptoms of mental aberration?

A constant dwelling on one idea: the idea that she would be brought to poverty and want — an idea which became a delusion and is now a belief —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

See above — Her mind revolves round the one thought of her own misery, helplessness and poverty —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has never refused food. Did once attempt her life but confessed at once. She took a liniment containing Ammonia.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Has some dyspepsia and has lost flesh —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Has been in the County Asylum twice and in a private asylum. Was discharged recovered. Was about from 7 to 12 months confined each time

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None, except providing her with a nurse accustomed to cases of unsoundness

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

1. Depression increasing. Considerable remissions in external signs is worse (i.e. more noisy &c) in the early morning before getting up: is quieter towards evening —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Miss Eliza Cole
Pickering

No 1141.

Sarah Williamson.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Williamson whom I last saw at house in Bellevue Street on the Second day of First mo: 1869 (a) as a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Sarah Williamson

Signed, *Name,* Susan Williamson

Occupation (if any), _____

Place of Abode, Bellevue Street, York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this Second Day of 1st month

One Thousand Eight Hundred and Sixty nine.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Williamson
Sex and Age	Female. aged 40 years.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Bonnet-maker.
Religious persuasion, as far as known	Society of Friends.
Previous Place of Abode	Bellevue Street. York.
Whether First Attack	No.
Age (if known) on First Attack	About 26 years.
When and where previously under Care and Treatment	The Friends' Retreat.
Duration of existing Attack	A week.
Supposed Cause	Consumption & illness of her father.
Whether subject to Epilepsy	No.
Whether Suicidal	Probable.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sarah Williamson. Bellevue St. York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Susan Williamson

Occupation (if any), _____

Place of Abode, Bellevue St. York

Degree of Relationship (if any), or other circumstance of connexion with the Patient Mother

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Wyatt

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Member of the College of Surgeons England

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, *as the case may be.*

hereby certify that I, on the second day of June

(c) *Here insert the street and number of the house (if any), or other like particulars*

at (c) the house of William Williamson on the Ouse Bank

in the County of York separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Sarah Williamson, Spinster, Bonnet Maker

of (d) Bishopthorpe and that

(e) Lunatic, *or* an Idiot, *or* a person of unsound mind

the said Sarah Williamson is

is a (e) Lunatic and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Her manner is excited, she is incoherent & fancies that she sees visions.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Wyatt

Place of Abode, 24 Petergate. York

Dated this 2nd day of June One Thousand Eight Hundred and Sixty nine

November 1/-

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, *as the case may be.*

hereby certify, that I on the second day of January 1869

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) 10 Bootham Terrace - Horsley Lane York

in the county of York separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Sarah Williamson

of (d) Bootham Terrace single woman and that

(e) Lunatic, *or* an Idiot, *or* a person of unsound mind.

the said Sarah Williamson

is a (e) Lunatic and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Delusion of Spirits. Restlessness - Rambling incoherent conversation

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North

Place of Abode, 21 Lendal York

Dated this 2nd day of June One Thousand Eight Hundred and Sixty nine

No 1142.
Caroline Bull.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In Membership by Convincement

2. Where was the place of birth of the patient?

Ramsden in Stock Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing peculiar

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Village School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

as domestic Servant habits regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Suffering from internal tumour for 18 months or more

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Uncertain

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? first symptoms about 27 years of age

15. What has been the duration of the present attack? gradually getting worse for 12 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? First

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Spirits much depressed temper very irritable. sometimes getting no rest general health very indifferent

19. What were the first decided symptoms of mental aberration? having all kinds of delusions

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. threatening suicide has cut her throat refusing food.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? occasional violence

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Yes.

23. What are the habits of the patient as regards personal cleanliness and decorum? very careless

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? usual medical attendance. but only under family restraint —

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? disorder increasing with lucid intervals, at uncertain times

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

The Overseers of Witham Mo Meeting. sent to Fred.k Marriage Barns' Farm Chelmsford

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Caroline Bull

whom I last saw at Ramsden

on the 24th day of February (a)

a (b) ~~Lunatic~~ Person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Caroline Bull

Signed, *Name,* Henry S Corder as overseer of Witham Mo Meeting

Occupation (if any), Farmer

Place of Abode, Writtle, Chelmsford

Degree of Relationship (if any), or other circumstances of connexion with the Patient None –

Dated this 25th Day of Feby 2nd Month

One Thousand Eight Hundred and Sixty ~~Eight~~ nine (HSC)

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Caroline Bull
Sex and Age	33 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Parents occupy small farm, has been domestic Servt
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Chelmsford & other Places
Whether First Attack	Yes –
Age (if known) on First Attack	Number
When and where previously under Care and Treatment	about 18 Months
Duration of existing Attack	Uncertain –
Supposed Cause	No
Whether subject to Epilepsy	Threatened many times
Whether Suicidal	Doubtful –
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Bull Ramsden Stock Nr Chelmsford

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Sarah Bull

Occupation (if any),

Place of Abode, ~~Home~~ Ramsden

Degree of Relationship (if any), or other circumstance of connexion with the Patient Mother of Patient

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

State the address of the house.
* description of person as mother servant &c.
* address required.
Some one relation must be specified—
† Name the informants

I, the undersigned Arthur Clarke
being a (a) ~~Surgeon~~ M.R.C.S. L.S.A
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 24th day of February
at (c) * Ramsden Bell House Parish
in the County of Essex separately from any other Medical Practitioner,
personally examined Caroline Bull * domestic Servant
of (d) * Ramsden Bell House Parish and that
the said Caroline Bull ~~a lunatic~~ domestic servant
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Having all kinds of delusions & great depression at times, threatening to destroy herself & Such as jumping herself on fire having her mouth full of Phosphorus &c.

2. Other facts (if any) indicating Insanity communicated to me by others (g) -
Refusing Food - Hates to see Mother & Family, Wandering away from her home - Persisting in Picking her bed for days together this is told me by her Father & Mistress

Signed, *Name,* Arthur Clarke
Place of Abode, Stock, Nr Ingatestone Essex -
Dated this 27th day of February One Thousand Eight Hundred and Sixty nine

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Oswald Copland
being a (a) Member of the Royal College of Surgeons of England and a registered Practitioner of Medicine
and being in actual practice as a (b) Surgeon and medical Practitioner at Chelmsford
hereby certify, that I on the Twenty Seventh day of February 1869
at (c) Ramsden Bell House Parish
in the county of Essex separately from any other Medical Practitioner,
personally examined Caroline Bull
of (d) Ramsden Bell House Domestic Servant and that
the said Caroline Bull ~~Ramsden~~ Bell House Parish
is a (e) person of unsound Mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) wildness of expression. great volubility, told me her room was full of rats, that she herself was encased in lead, that one leg was cut off and one made of steel substituted, that she herself was dressed in tinder, that a former mistress had ridden from her grave and appeared to her as Mrs Copland she was dressed up.

2. Other facts (if any) indicating Insanity communicated to me by others (g) great restlessness at night, that a girl actually in her father mother and sisters abuses them and calls them opprobious names, sometimes will not get up in the morning has thrown her breakfast out of the window, has barricaded the door with her bedstead, has threatened to drown herself, wanders about in woods and by lanes at late hours. This is told me by her father and mother

Signed, *Name,* Oswald Copland
Place of Abode, Chelmsford
Dated this 27th day of Feb.y One Thousand Eight Hundred and Sixty nine

No 1143.
Mary M. Stevens.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Yes to both questions.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

not known

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

See answer formerly sent

15. What has been the duration of the present attack?

Severely for a few days only

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

These facts are believed to be known to the Superintendent of the Retreat

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

D.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing particular in this respect

19. What were the first decided symptoms of mental aberration?

Not known

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The subject mentioned in the Medical Certificates is the most observable.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She has lately refused food, until almost compelled to take it — no disposition to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very dirty

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In good health, but is afflicted with Rupture for which a new truss has been supplied a few days since

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Known to the Retreat authorities

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None of late

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

It has been nearly stationary since the present attack came on.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Ratcliff & Barking Monthly Meeting
accounts to be sent to the Clerk
Rickman Godlee

Upton Shafford
Mr London E. 27/2/69

No 1143. Mary M. Stevens.

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

•

was admitted into this (a) as a Private Patient, on the

. Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(a) House or Hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 94.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Mary Moline Stevens whom I last saw at Raistow Essex. on the or about fourteenth day of February 1869 (a) as a (b) Lunatic — as a Patient into your House.

(a) Within one month previous to the date of the order.

(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Mary Moline Stevens

Signed, Name, Rickman Godlee

Occupation (if any), Barrister

Place of Abode Upton nr Shalford Essex

Degree of Relationship (if any), or other circumstances of connection with the Patient } An Overseer & at the Meeting of the Society of Friends by whom the Patient is chiefly maintained

Dated this twenty-sixth day of February One Thousand Eight Hundred and Sixty nine

To Dr J. Kitching Superintendent of (c) the Retreat (d) York —

(c) Proprietor or superintendent of.

(d) Describing the house or hospital by situation and name, if any.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Mary Moline Stevens
Sex and Age	Female D K plan insert age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Formerly engaged in a girls School of the Society of Friends.
Religious Persuasion, as far as known	— Charlton nr Woolwich Kent
Previous Place of Abode	— no.
Whether First Attack	D K plan fill up
Age (if known) on First Attack	Retreat York in the years 1861 & 1866
When and where previously under Care and Treatment	Partially affected for several days, but more severely the last few days.
Duration of existing Attack	not known
Supposed Cause	No
Whether subject to Epilepsy	— No.
Whether Suicidal	— no.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	none
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	Edwin Henry Stevens with Jos B. Marsh, Wimbledon nr Lond SW.
Name and Address of Relative to whom Notice of Death to be sent	

(e) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (e) Rickman Godlee

Occupation (if any), —

Place of Abode, —

Degree of Relationship (if any), or other circumstances of connexion with the Patient } —

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Thomas Drake being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I, on the 26th day of February 1869 at (c) Mrs London's Church Street West Ham in the County of Essex separately from any other Medical Practitioner, personally examined Mary Moline Stevens, Spinster — of (d) Church Street West Ham aforesaid and that the said Mary Moline Stevens is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
She had a wild look & she told me the devil was behind her bed & she could smell sulphur & I should be burnt with her if I did not go away

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mrs London the landlady of the house told me, she tries to send them all out of the house but they should be burnt with brimstone

Signed, *Name,* Thomas Drake

Place of Abode, Stratford Essex

Dated this 26th day of February One Thousand Eight Hundred and Sixty nine

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, John Blydenham Reynolds being a (a) Member of the Royal College of Surgeons of England and a Licentiate of the Society of Apothecaries and being in actual practice as a (b) Surgeon hereby certify, that I, on the 26th day of February 1869 at (c) Mrs London's Church Street West Ham in the County of Essex separately from any other Medical Practitioner, personally examined Mary Moline Stevens, Spinster — of (d) Church St West Ham aforesaid and that the said Mary Moline Stevens is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Says she is in that wicked place down below, and that there is now only a little bit of her left. Says as you know I am dead, what is the good of a Medical man seeing me, [illegible] what a dreadful thing it is to be thousands of years in such a place

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs London the landlady tells me that she says she is lost, and that sometimes she says the devil is behind me, you will be burnt — if you do not at once make your escape from the house. She has attempted her person on more than one occasion

Signed, *Name,* John Blydenham Reynolds

Place of Abode, 5 Turnham Terrace Stratford Essex

Dated this 26th day of February One Thousand Eight Hundred and Sixty nine

Dr Kitching

No 1144. C Fardon.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 20th day of March 1869, of Miss Charlotte Fardon a Private Patient in West Malling House, Kent - to The Retreat House, York -

Given under our hands this 4 day of March in the year of Our Lord One Thousand Eight Hundred and Sixty nine

R W Hutchinson
Robert Nairne
} Commissioners in Lunacy.

ORDER.

I,* Thomas Fardon the undersigned having Authority to discharge Charlotte Fardon a Private Patient in West Malling House, Kent hereby order and direct that the said Charlotte Fardon be removed therefrom to The Retreat, York -

Given under my hand this* 9 day of March in the year of Our Lord One Thousand Eight Hundred and Sixty nine

(Signed) Thomas Fardon

Place of Abode Meadow Bank House Maidstone Kent.

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(500 6|68—H & S 411)

348

No 1144.

Charlotte Hardon

NOTICE OF ADMISSION.

To be sent to the Commissioners in Lunacy within one clear day *from the Patient's Reception.*

I hereby give you Notice, That Miss Charlotte Hardon was admitted into this Asylum as a Private Patient, on the Seventh Day of November 1868 and I hereby transmit a Copy of the Order and Statement and Medical Certificate on which he was received (*a*).

(*a*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, Thomas Harvey Lowry M.D.

(*b*) Proprietor.

West Malling Place.

Kent.

Dated the 5th Day of November.

One Thousand Eight Hundred and Sixty eight.

To the _____

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (F) No. 2.

I, the undersigned, hereby request you to receive Charlotte Pardon whom I last saw at Meadow Bank House, Tovil Road. Maidstone on the Seventh day of November (a) a (b) person of Unsound Mind as a Patient into your Asylum.

Subjoined is a Statement respecting the said Charlotte Pardon

(a) Within one month previous to the date of the order.

(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, Name, Thomas Pardon

Occupation (if any), Chemist & Druggist

Place of Abode, Meadow Bank House. Tovil Road. Maidstone. Kent.

Degree of Relationship (if any) or other circumstances of connexion with the Patient } Father.

Dated this Seventh Day of November One Thousand Eight Hundred and Sixty eight

To DR. LOWRY, Proprietor,

(c) *West Malling Place, Kent.*

(c) Describing the asylum

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Charlotte Pardon.
Sex and Age	Female — age 22 —
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Living with her parents.
Religious Persuasion, as far as known	Member of the Society of Friends.
Previous Place of Abode	Has never lived from Home.
Whether First Attack	— First.
Age (if known) on First Attack	About 20.
When and where previously under Care and Treatment	Under Medical Treatment at Maidstone.
Duration of existing Attack	About 2 years —
Supposed Cause	Not known —
Whether subject to Epilepsy	— No —
Whether Suicidal	— No —
Whether dangerous to others	— No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	—
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Mr. Pardon. Meadow Bank House Tovil Road. Maidstone.

(d) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, Name, (d) Thomas Pardon

Occupation (if any), Chemist & Druggist

Place of Abode, Meadow Bank House Tovil Road Maidstone. Kent

Degree of Relationship (if any) or other circumstances of connexion with the Patient } Father.

MEDICAL CERTIFICATE.—**Sched. (F). No. 3.**

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians, in London.

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *A. B. of* ——— *Insert residence and profession, or occupation (if any).*

(e) Lunatic, or an idiot, or a person of unsound mind

(f) *Here state the facts,*

(g) *Here state the information, and from whom.*

I, the undersigned, Henry Cecil Smith being a (a) Member of the College of Surgeons London & L S C and being in actual practice as a (b) Surgeon hereby certify, that I, on the Third Day of November 1868 at (c) Meadow Bank House, Forit Road, Maidstone in the County of Kent separately from any other Medical Practitioner personally examined (d) Charlotte Pardoe. Spinster, Meadow Bank House, Forit Road, Maidstone and that the said Charlotte Pardoe is a (e) person of Unsound Mind and proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following, ground; viz.:

1. Facts indicating Insanity observed by myself (f) Upon my introduction to her, altho' a stranger, she remained quite sparkling, until I entered into conversation, with others in the same room – then she kept dancing perfectly, & then suddenly turning away would look about the room without any apparent object, last like laughter & shouts, clenching herself – then addressed herself as if talking to others

2. Other facts (if any) indicating Insanity communicated to me by others (g) The Parents state that for the last two years they have noticed a very irritable state of mind, she has been seen alone to gesticulate and act as if she were conversing with some imaginary person. A total disregard to personal appearance. Indifferent to the calls of Nature.

Signed, *Name,* Henry Cecil Smith

Place of abode, 91 King Street, Maidstone.

Dated this Eighth Day of November One Thousand Eight Hundred and Sixty Eight.

MEDICAL CERTIFICATE.—**Sched. (F). No. 3.**

(a) *Here set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians, in London.

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *A. B. of* ——— *Insert residence and profession, or occupation (if any).*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts,*

(g) *Here state the information, and from whom.*

I, the undersigned, Albert Davies being a (a) Doctor of Medicine of the University of Aberdeen & L R C P and being in actual practice as a (b) Physician hereby certify, that I, on the Eighth Day of November at (c) Meadow Bank House, Forit Road, Maidstone in the County of Kent separately from any other Medical Practitioner personally examined (d) Charlotte Pardoe, Spinster – Meadow Bank House, Forit Road, Maidstone and that the said Charlotte Pardoe is a (e) Unsound Mind and proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following, ground; viz.:

1. Facts indicating Insanity observed by myself (f) I have not discovered any particular delusion but I observe a peculiar expression with a restless & abstracted manner, she avoids eye & is incapable of carrying on a connected conversation – her replies are without meaning & confused – Loss of Memory.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs Pardoe, her doctor says will not attend to her ordinary duties – has become dirty in her habits – her temper occasionally very violent and has on several occasions abused her Mother – She uses bad language and acts in a manner very different to her natural character which was gentle, amiable, & ladylike

Signed, *Name,* Albert Davies

Place of abode, Clarendon Place. Maidstone

Dated this Eighth Day of November One Thousand Eight Hundred and Sixty eight –

The enclosed is a Copy
of Miss Charlotte Sanders
Order & Certificate of Addition
at West Malling Place
Kent.

March 15th 1869.

Thos. Harvey Lowry M.D

No 1125. Christina Jane Robinson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A member by birthright

2. Where was the place of birth of the patient? Gosnell Street. Tidy Road.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing except delicate health.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Of a quiet and gentle disposition. Slow & unmethodical habits.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She left the united training & school until nine years at Croydon School. Some time besides other schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Mostly at home but several times in situations which she never liked long.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Single.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? When a school showed great taste for drawing but backward in other things except needlework

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Nothing of the kind.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No. Nervous illness incident to children usually felt heavily on her.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Yes one her mother's sister more than one.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Unhappiness of mind the cause

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About the age of 21 yrs

15. What has been the duration of the present attack? 16 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Once before from the same causes already mentioned + Nervous apprehensions for several months

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Quite well between the intervals more than three years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Loss of appetite, spirits depressed, temper irritable, little sleep

19. What were the first decided symptoms of mental aberration? Said she had a vision and strange idea about illness of Father and friends without any cause

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

On scriptural subjects chiefly but on many others, often threatened people with hell fire

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Only in the matter of clothes which she destroys

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Some month back it was difficult to get her to eat but not lately

23. What are the habits of the patient as regards personal cleanliness and decorum?

Extreme cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. In good health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Never.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Dr May of Tottenham. Health improved

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Francis Trejellis
for Tottenham Monthly Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Christiana Jane Robinson whom I last saw at Ann Walker 30 Red Lion St Clerkenwell on the 26 day of 4 mo 1869 (a) a (b) Person of Unsound mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Christiana Jane Robinson

Signed, *Name,* Mary Ann Robinson
Occupation (if any), Assistant in Refuge
Place of Abode, 17 & 18 Little Saffron Hill
Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this 5th Day of 5 mo
One Thousand Eight Hundred and Sixty 9

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Christiana Jane Robinson
Sex and Age	Female 26
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	A domestic Servt.
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Ilford Essex
Whether First Attack	No
Age (if known) on First Attack	21
When and where previously under Care and Treatment	No
Duration of existing Attack	16 mo
Supposed Cause	Suppression of monthly courses
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	yes by W. Roy - May 4th
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sarah Ann Robinson White Hart Little Ilford Essex

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Isabell Charleton
Occupation (if any), Matron of Refuge
Place of Abode, 17 & 18 Little Saffron Hill
Degree of Relationship (if any), or other circumstance of connexion with the Patient None

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Edward Hooper May

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

being a (a) Fellow of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the fourth day of May
at (c) High Cross Tottenham
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Christiana Jane Robinson
of (d) Whitta Road Little Ilford and that
the said Christiana Jane Robinson
is a (e) of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

× Confusion of ideas & unnatural manner in Conversation & such as while talking on subject of a different kind speaking of her late father without apparently any change in the topic of conversation.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) × Was informed by Fanny Hall (sister) that she has frequently taken to herself - in conversation pushes tasks - Sometimes leaves off mid article of dress - used to strip herself completely - Her employers speak about her Father

Signed, Name, Edward Hooper May M.D.
Place of Abode, High Cross Tottenham
Dated this fourth day of May One Thousand Eight Hundred and Sixty nine. —

State how the information was known

Name of Informant (if any)

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Wm Tyndale Watson

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

being a (a) MD & M.R.C.S.
and being in actual practice as a (b) Surgeon &
hereby certify, that I on the fourth day of May 1869
at (c) High Road Tottenham
in the county of Middlesex separately from any other Medical Practitioner,
personally examined Christiana Jane Robinson
of (d) Whitta Road Little Ilford and that
the said Christiana Jane Robinson
is a (e) of Unsound Mind — and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Her appearance is indicative of insanity
Her ~~Memory~~ is very weak (good for her)
She states that she frequently leaves her clothes on the ground because her memory is bad - says that she has scriptural reasons for going about naked. Believes she is a domestic Servant although it is not so.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

A gentlemen passing her house last summer told me that he saw her quite naked in the front garden -
Her sister states that "the Spirit" prevents her from getting up from bed - when she remains there all day.

Signed, Name, Wm Tyndale Watson MD
Place of Abode, Westgreen Tottenham
Dated this fourth day of May One Thousand Eight Hundred and Sixty nine -

Name of Informant

I was informed by Samuel Brown Esq. of Tottenham who saw her on the Railroad about to assault -

The other information I received from her sister Hannah Robinson

W.T.W

No 1146 John Webster Nicholson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Hensler.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing –

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing noticeable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Left School about 14 yrs of age

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Grocer, he was industrious & temperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 24 – 11 children – 25 & 13 years

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Has been a good business man and for the last 2 or 3 years he has taken great interest in the town business & as a Guardian of the Poor –

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Rheumatism –

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Uncertain –

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 52 –

15. What has been the duration of the present attack? about 4 weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? –

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

very irritable and sleep less

19. What were the first decided symptoms of mental aberration? Loss of Memory and Delusions e.g. presentation of a song to her Majesty &c &c

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Various delusions vide 19

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Destruction of Business papers as ledgers &c

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? no

23. What are the habits of the patient as regards personal cleanliness and decorum? disinclination to wash himself –

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Tolerable

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Bromide of Potassium and Iron without any improvement

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

1 Increasing 2 no 3 Quieter sometimes than often at uncertain intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Mrs McIldoon

No 1146.

John Webster Nicholson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Webster Nicholson

whom I last saw at Angola House Church St Hunslet

on the twenty first day of May 1869 (a)

a (b) person unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said John Webster Nicholson.

Signed, *Name,* John Carr Nicholson

Occupation (if any), Manufacturing Chemist

Place of Abode, Hunslet

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son

Dated this 21st. Day of May

One Thousand Eight Hundred and Sixty nine

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	John Webster Nicholson
Sex and Age	52 yrs
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Manufacty Chemist
Religious persuasion, as far as known	Wesleyan Methodist
Previous Place of Abode	Angola House Church St Hunslet
Whether First Attack	First attack.
Age (if known) on First Attack	52 yrs.
When and where previously under Care and Treatment	—
Duration of existing Attack	1 month
Supposed Cause	Rheumatism
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mr John Carr Nicholson jr

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Carr Nicholson

Occupation (if any), Manufacturing Chemist

Place of Abode, Hunslet

Degree of Relationship (if any), or other circumstance of connexion with the Patient Son

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned Thomas Clifford Allbutt being a (a) Doctor of Medicine of the University of Cambridge and being in actual practice as a (b) Physician hereby certify that I, on the ~~[illegible]~~ twenty first day of May 1869 at (c) Angola House Church Street Hunslet in the County of Yord separately from any other Medical Practitioner, personally examined Mr John Webster Nicholson of (d) Angola House Church Street Hunslet Manufact. Chemist and that the said John Webster Nicholson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) That he is about to marry Miss Burdett Coutts — and that he is possessed by delusion of grandiose and excited kind. That he has several permanent delusions, regarding the building of vast edifices — churches &c. That he is very incoherent both in speech & in writing, as he has just written me an account of a proposal for [illegible] building.

2. Other facts (if any) indicating Insanity communicated to me by others (g) That he has been more or more sleepless for some time past. That he is excited & very irritable in manner — & unmanageable. That his conduct in business has been wildly foolish &c &c. These facts I hear from his wife son & daughter.

Signed, Name, Clifford Allbutt
Place of Abode, 38 Park Square Leeds

Dated this twenty-first day of May One Thousand Eight Hundred and Sixty nine

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, being a (a) Member of the Royal College of Surgeons & Licentiate of the Society of Apothecaries (London) and being in actual practice as a (b) Surgeon and Apothecary — hereby certify, that I on the Twenty-first day of May at (c) Angola House. Church Street, Hunslet — in the county of — York — separately from any other Medical Practitioner, personally examined Mr John Webster Nicholson. of (d) Angola House. Hunslet. Manufacty Chemist and that the said John Webster Nicholson is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He is wild and incoherent and has various delusions e.g. that he is going to marry Miss Burdett Coutts — build innumerable churches — present a pony to her Majesty &c &c.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, George Standcock
Place of Abode, Leathley Lodge, Hunslet

Dated this 21st day of May One Thousand Eight Hundred and Sixty nine.

No 1147

James Edward Dawes

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? He is a member of the Society

2. Where was the place of birth of the patient? 7 College Place City Road London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Of an average intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Received his education at Friends School Croydon Surrey

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Cabinet Maker & very industrious previous to the last ten years

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? After having for years lost his money in shop keeping

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Eyebrow ague afterwards a peculiar affection of the sight

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? His father & Grandfather were peculiar in their ideas with regard to money amounting to monomania

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Cause unknown & disease of gradual growth

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About 32 years of age

15. What has been the duration of the present attack?

No distinct attack but of gradual developement

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

No intervals

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

Closing his shop & locking the door & leaving it unknown to any one for 3 or 4 hours

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Complaining of dust & dirt & yet dirty in his habits also constantly finding fault of all food, passionate gesture

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Some to fits of stamping his feet when asked to exert himself

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

At first refuses food but afterwards eats as much or more than others

23. What are the habits of the patient as regards personal cleanliness and decorum?

Of dirty habits & lost to decorum

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Not of good health & complains of pain in the back & general weakness

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

About 2 years ago was under treatment at the Opthalmic Institute at Manchester with partial benefit for 3 months

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Gradually increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Charles Joseph & Dawes &
Walter Jolliffe Dawes
29 Church Street
Stoke Newington

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Edward Dawes whom I last saw at 19 Victoria Grove Stoke Newington on the ninth day of seventh month within one month (a) a (b) a person of unsound mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a statement respecting the said James Edward Dawes

Signed, *Name,* Charles Joseph Dawes
Occupation (if any), Photographic printer
Place of Abode, 5 Henslidge Villas St Johns Wood
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this ninth Day of seventh month
One Thousand Eight Hundred and Sixty nine

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	James Edward Dawes
Sex and Age	Male, 42 Years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Supported by his Mother formerly Cabinet Maker
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	19 Victoria Grove Stoke Newington
Whether First Attack	Yes
Age (if known) on First Attack	About 32 years.
When and where previously under Care and Treatment	Not been under care.
Duration of existing Attack	Gradual increase for the last ten years
Supposed Cause	Not known
Whether subject to Epilepsy	No
Whether Suicidal	Has made no decided attempt
Whether Dangerous to others	No but gives cause of alarm
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Walter Sotcliffe Dawes 29 Church Street Stoke Newington.

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Charles Joseph Dawes
Occupation (if any), Photographic printer
Place of Abode, Henslidge Villas, St Johns Wood.
Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Robert Woodman M.D.
being a (a) Member of the Royal College of Surgeons England
and being in actual practice as a (b) Physician & Surgeon
hereby certify that I, on the ninth day of July 1869
at (c) 19 Victoria Grove (Aylesbury Cottage) (Stthekensington) Parish of South Hornsey
in the County of Middlesex separately from any other Medical Practitioner,
personally examined James Edward Dawes
of (d) 19 Victoria Grove (Aylesbury Cottage) South Hornsey and that
the said James Edward Dawes
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Insane & Vacant look never looks you in the face & replies to the questions "yes" or "no" or "oh" & then not always. Carefully avoids me & is on his guard & does not seem at all at ease in my presence. He kept me at the door for about a minute & a half before he came out & then he came in late & then he talked to himself greater part of the night disturbing other inmates of the family in adjoining apartments repeating the same sentence continually with "oh" "oh" "oh" — Objects to do anything that will soil his hands & is dirty in his habits & rarely washes himself at all except his hands & face which he washes frequently. He prefers to stand for an hour or two in the corner of the room with his face to the wall & then suddenly removes himself to the fireplace & stands with his back to it — will only sit in one particular chair

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Dated this ninth day of July One Thousand Eight Hundred and Sixty nine

Wm Robt Woodman M.D
Victoria Villa Stthekensington Rd London

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

From his Brother Walter Sollitt Dawes, Charles Joseph Dawes, his sister in law Rosetta Dawes also from his mother Ann Dawes

Secretes himself at the top of the stairs in the middle of the day & closed at him

Tongue furred his face look pale

Pupil of eye was at back and bowels was confined

was done, must be kept warm & drink to be given

No quarrel or dispute or provocation appears to account for such a sudden attack

Constantly complaining Cannot keep food & says everything is nasty "is nasty tea" "nasty coffee" &c. Liquid nourishment & tea must be very good meat

He complains that his fork passes directly to his hands that they are so disordered

Seemed to place his hands on each other & walk about

Called it drinking

Seemed to remember his brother

From his Brother Charles Joseph & Walter Sollitt Dawes

& his Mother Ann Dawes

Reader, in case this book should ever fall into the hands of any one else in the meeting Saith he had looked at all their hands at the meeting & compared them with his own & his own hands were dropsical (so he said)

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Baxter Sollitt
being a (a) Fellow of the College of Surgeons of England
and being in actual practice as a (b) Consulting Surgeon
hereby certify, that I on the ninth day of July 1869
at (c) 19 Victoria Grove (Aylesbury Cottage) Stke Newington
in the county of Middlesex separately from any other Medical Practitioner,
personally examined James Edward Dawes
of (d) 19 Victoria Grove Stke Newington and that
the said James Edward Dawes
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Imbecile & Vacant look never looking you full in the face - replying to questions with "oh" "oh" "yes" & Rambling incoherent answers. States that he is incapable of work & yet can give no reason for it. formerly he was of very industrious habits, Makes frantic noises - summons and when between himself & visitors - Att violent & unmanageable manner. he complains of eating long hair & says he sees & hears

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Great forgetfulness of purpose. Sits with his hat & coat on for hours together without any fixed occupation & appears standing or walking for hours together - Constantly muttering to himself, makes strange noises may make a bit of cloth, pretends to cut it with his hands & seems intensely engaged at the

Signed, Name, Baxter Sollitt F.R.C.S.
Place of Abode, 34 Finsbury Square

Dated this ninth day of July One Thousand Eight Hundred and Sixty nine

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. —Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

No. 1148.

Mary Lees.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

She is a member

2. Where was the place of birth of the patient?

Worldale

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? no – Her mother died when she was 9 days old & she was brought up by an indulgent aunt.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

She was considered very bright – perhaps rather precocious.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Educated first at a village school & afterwards at Ackworth.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Domestic servant first at Ackworth School. Afterwards at Hull & her conduct very orderly.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 40: no children.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Nothing particular, fond of travelling & travelled for 3 years in America

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

no.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Has had two attacks threatening apoplexy.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

About 9 years of age, she fell down a flight of stone steps, & was taken up insensible, which was thought to have affected her brain.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

no

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The two attacks threatening apoplexy occurred without apparent cause: her father had several attacks of this kind during his later years.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? about 56

15. What has been the duration of the present attack? It has continued with some intermission since the above period.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? There were alternate periods of unnatural depression & elation.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
No remarkable change — See previous answer.

19. What were the first decided symptoms of mental aberration? Great depression, with occasional threatening of suicide

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Nothing particular. unless it be the constant desire for change — prefers travelling to domestic employment.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Prone at times to destroy earthenware & furniture. Never made any attack on any one else.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Occasionally wants refuse food except tea — & wants remain in bed day & night.

23. What are the habits of the patient as regards personal cleanliness and decorum?
Generally good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Pretty good general health — but bowels costive

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Never.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Change of air & scene: She has consulted Dr. Turnbull & J. B. Yorkshott — without permanent benefit.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing for some time — with remissions at uncertain periods.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
John Lee Esq Commercial Agent Huddersfield

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Lees

whom I last saw at 7 Commercial Street Huddersfield

on the twenty third day of Seventh Month 1869

a (b) person of unsound mind, as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Mary Lees

Signed, *Name,* John Lees

Occupation (if any), Cutler

Place of Abode, 7 Commercial Street Huddersfield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this 23 day of 7mo Day of

One Thousand Eight Hundred and Sixty 9

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Mary Lees
Sex and Age	Female. 62.
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Wife of John Lees (Cutler) formerly Domestic Servant
Religious persuasion, as far as known	Member of the Society of Friends.
Previous Place of Abode	Pontefract
Whether First Attack	Considered to be a continuation of the first
Age (if known) on First Attack	56
When and where previously under Care and Treatment	Never before except at home
Duration of existing Attack	Several years
Supposed Cause	Tendency to apoplexy
Whether subject to Epilepsy	not known to be so.
Whether Suicidal	Yes.
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	has been examined
Name and Address of Relative to whom Notice of Death to be sent	John Lees — 7 Commercial Street Huddersfield.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Lees X

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind

I, the undersigned, John Benson Pritchett
being a (a) Member of the College of Surgeons & Lic: Apothecaries Society
and being in actual practice as a (b) Surgeon.
hereby certify that I, on the twenty second day of July. 1869
at (c) 7 Commercial Street. Huddersfield
in the County of York. separately from any other Medical Practitioner,
personally examined Mary Lees
of (d) 7 Commercial Street. Huddersfield and that
the said Mary Lees.
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) unusual dirty habits; a frequent inclination to suicide general despondency.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) husband & servant say she gets up in the night: and upsets all Sarah Milnes her drawers, and strips up carpets &c

Signed, *Name,* John Benson Pritchett
Place of Abode, Huddersfield
Dated this 22 day of July One Thousand Eight Hundred and Sixty nine

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Wm Turnbull
being a (a) ~~M.~~ D. Edinb: &c &c
and being in actual practice as a (b) Physician
hereby certify, that I on the 22nd ~~July~~ day of July 1869
at (c) 7 Commercial Street, Huddersfield
in the county of York separately from any other Medical Practitioner,
personally examined Mary Lees, wife of John Lees, Butler,
of (d) 7 Commercial Street, Huddersfield; and that
the said Mary Lees
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She often talks incoherently & her manners are completely changed from what they used to be. She will often stop me in the street & tell me a silly tale - and laugh immoderately - she told me today she often thought of drowning herself - and wished I would send her to York to be taken care of.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her Husband tells me she is often unmanageable - breaks every thing - will not undress at nights - and will beg and do many foolish things I have known her long & can easily observe a great change in her habits.

Signed, *Name,* Wm Turnbull M.D.
Place of Abode, Huddersfield
Dated this 22nd day of July One Thousand Eight Hundred and Sixty 9

No 1149. Rachel Wheatley.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Rachel Wheatley whom I last saw at 45 Townend Street – York on the Twenty fifth day of July (a) a (b) person of unsound Mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Rachel Wheatley

Signed, *Name,* James Baker

Occupation (if any), Draper

Place of Abode, Heworth Green

Degree of Relationship (if any), or other circumstances of connexion with the Patient an Overseer of York Monthly Meeting of the Society of Friends

Dated this Thirtieth Day of July –

One Thousand Eight Hundred and Sixty nine

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Rachel Wheatley
Sex and Age	Female – about 68 –
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	formerly a domestic Servant
Religious persuasion, as far as known	nearly 40 years an Insalede – a member of the Society of Friends
Previous Place of Abode	– 45 Townend Street
Whether First Attack	yes
Age (if known) on First Attack	unknown.
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	about 5 weeks of increased severity but for several years been affected.
Supposed Cause	old age
Whether subject to Epilepsy	no
Whether Suicidal	not Suicidal –
Whether Dangerous to others	not dangerous
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	James Baker Ty Pavement – York

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) James Baker

Occupation (if any), Draper

Place of Abode, Heworth Green – York

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Drapper
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the twenty ninth day of July
at (c) 45 Townend St. Groves
in the County of York separately from any other Medical Practitioner,
personally examined Rachel Wheatley - single woman
of (d) 45 Townend St Groves and that
the said Rachel Wheatley
is a (e) person of unsound Mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Non communication is incoherent - Memory almost incessantly - Conversation and Conduct contradictory and inconsistent -

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Wm Drapper
Place of Abode, 85 Minster Yard York.
Dated this 25th day of July One Thousand Eight
Hundred and Sixty nine

MEDICAL CERTIFICATE—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty ninth day of July 1869
at (c) 45 Townend Street Groves York
in the county of York separately from any other Medical Practitioner,
personally examined Rachel Wheatley single woman
of (d) 45 Townend St Groves York and that
the said Rachel Wheatley
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
Demented - she is ignorant of time and place of which has no idea of the month of time she has resided with the family with whom she lodges.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, S. W. North
Place of Abode, St Leonards York
Dated this 30th day of July One Thousand Eight
Hundred and Sixty nine

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? birthright

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

No 1150 Fred.k Knight.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 2nd day of August, 1869, of Frederick Knight a Private Patient in W. Tomkin's House, Witham to the Retreat ~~House~~, York

Given under our hands this 22nd day of July in the year of Our Lord One Thousand Eight Hundred and Sixty nine

R W Ludwidge
Robert Lairne
} Commissioners in Lunacy.

ORDER.

I,* Mary Ann Knight the undersigned having Authority to discharge Frederick Knight a Private Patient in W. Tomkin's House, Witham hereby order and direct that the said Frederick Knight be removed therefrom to the Retreat, York ~~House~~

To the Superintendent by Wm Knight

Given under my hand this* 29th day of 7th Month in the year of Our Lord One Thousand Eight Hundred and Sixty Nine

(Signed) Mary Ann Knight

Place of Abode Braintree Botking Essex

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(500 6|68—H & S 411)

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No 1150. Fred[k] Knight

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Fredrick Knight

whom I last saw at Bocking Essex

on the Eleventh day of June (a)

a (b) 1869. a Lunatic as a Patient into your house.

(a) Within one month previous to the date of the order.
(b) Lunatic or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Frederick Knight

Signed, Name, Mary Ann Knight

Occupation (if any), Ironmongers wife

Place of abode, Bocking Essex

Degree of Relationship (if any), or other circumstances of connexion with the Patient - Wife

Dated this Eleventh Day of June

One thousand eight hundred and sixty nine

To Mr. Thomas M. Tomkin,

Proprietor and Medical Superintendent of the

Lunatic Asylum, Witham, Essex.

STATEMENT.

If any Particulars in this Statement be not known, the Facts to be so stated.

Name of Patient, with Christian name at length	Frederick Knight
Sex and Age	male 59 years
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	Ironmonger.
Religious Persuasion, as far as known	Friend or Quaker
Previous Place of Abode	Lives at Bocking Essex
Whether First Attack	Has had delirium Tremens some years back
Age (if known) on First Attack	about 35
When and where previously under Care and Treatment	never treated anywhere but at home
Duration of existing Attack	five or six weeks
Supposed Cause	Excited by illness & death of Daughter
Whether Subject to Epilepsy	No but he has had slight Paralytic
Whether Suicidal	Attempted self destruction years ago
Whether Dangerous to others	He indulges in Threats & has thrown things at his wife
Whether found Lunatic by Inquisition and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Mary Ann Knight Bocking Essex

(c) Where the person signing the Statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) Mary Ann Knight

Occupation (if any), Ironmongers wife

Degree of Relationship (if any) or other circumstances of connexion with the Patient - Wife

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, Surgeon, *or* apothecary, *as the case may be*
(c) *Here insert the Street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, or a person of unsound mind.
(f) *Here state the facts.*

I, the undersigned, being a (a) Surgeon and Apothecary
and being in actual practice as a (b) Surgeon and Apothecary
hereby certify, that I, on the Eleventh day of June
at (c) Halstead at the house of Samuel Knights High Street Halstead
in the County of Essex separately from any other Medical Practitioner,
personally examined Frederick Knights of (d)
Rayne Road. Bocking. Essex. Ironmonger. and that
the said Frederick Knights is a (e)
person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I haved formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Extreme restlessness of manner rambling & incoherent in conversation full of tricks of a childish character. Saw him gesticulating before my house in the public street & driving from place to place in an eccentric and objectless manner He told me he was watched by some enemies & if he had a revolver he would have shot them he was anxious to follow me about the Street without his hat &c

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
His Daughter-in-law Samuel Knights High St. Halstead tells me that he had come to visit her for a few days & says that change will do for him went into the next door neighbours & played violently on his piano then bought a loaf of bread and wanted to pay a Sovereign for it then went into a neighbours & asked for a chair but said it must be placed upside down to sit on &c.

Signed, Name, Henry Grantham Member of the Royal College of Surgeons of England and Licentiate of the Apothecaries Society London
Place of abode, Head Street Halstead.

Dated this Eleventh. Day of June One Thousand Eight Hundred and Sixty nine.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, Surgeon, *or* apothecary, *as the case may be*
(c) *Here insert the Street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, or a person of unsound mind.
(f) *Here state the facts.*

I, the undersigned, being a (a) Surgeon & Apothecary Member of the Royal College of Surgeons of England & Licentiate of the Apothecaries Company.
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify, that I, on the Eleventh day of June.
at (c) Bocking
in the County of Essex separately from any other Medical Practitioner
personally examined Frederick Knight of (d)
Rayne Road Bocking Essex Ironmonger and that
the said Frederick Knight isa (e)
Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)
A marked change in appearance for the worse incoherent in his talking to day talkative last night sullen & not answering when spoken to

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Father in Law Samuel Knight. says he would only sit in his shirt for three hours last night. calling for tea but throwing tea things & all into the fire & threatened to cut his own throat as well as untreties.

Signed, Name Thos. Taylor
Place of abode, Bocking Essex.

Dated this Eleventh Day of June One Thousand Eight Hundred and Sixty nine

NOTICE OF ADMISSION.

Sched. (C.) Sect. 24.

I hereby give you Notice, That

(a) House or Hospital.

was admitted into this (a) as a Private Patient, on the

Day of 186 and I hereby

transmit a Copy of the Order and Medical Certificate on which he was

received (b)

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) Superintendent, or Proprietor of ———.

(c) *Medical Proprietor of the*

Witham Essex Asylum.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the _____

No 1150 Fred^k Knight

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Birthright membership and connected with Society of Friends but not now a member

2. Where was the place of birth of the patient?

Halstead Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No-

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

of amiable disposition the answer to the other question in the negative

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Not known Educated at Friends School Islington

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Watchmaker Industrious but very sociable & fond of company

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married age 26 had 2 beloved Daughters the Eldest 31 Youngest deceased about 10 weeks 2 would have been now 30

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No-

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

One slight Paralytic seizure about 3 Months ago

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Yes Defective sight which has caused for a long time extreme nervous irritability

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No-

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

There has been only one attack of mental disorder caused remotely by intemperance, immediately by the paralytic seizure & congestion of the Brain

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

60

15. What has been the duration of the present attack?

6 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Extreme Irritability of temper & unusual elevation of spirits & sleepless nights for months past

19. What were the first decided symptoms of mental aberration?

Incoherency of Speech & violent manners

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Dislike of those dearest to him
Belief in his own consequence & wealth

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Frequent Threatenings & violence

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He refuses solid food

23. What are the habits of the patient as regards personal cleanliness and decorum?

When well extremely particular & clean but since his detention not quite so much this decorum good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

very weak from the effects of his late attack

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Yes at Dr Tomkins Witham Essex 6th mo 1869 three 6 weeks no better — or but little

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder stationary occasionally more sane than at other times no great remissions

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mary Ann Knight
Booking Branches
Essex

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Frederick Knight whom I last saw at Mr Tomkyns Asylum Witham Essex on the Twenty Ninth day of Seventh Month 1869 (a) a (b) Lunatic as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Frederick Knight

Signed, *Name,* Mary Ann Knight
Occupation (if any), Ironmonger
Place of Abode, Braintree Barking Essex
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Wife

Dated this 29th Day of 7th Month
One Thousand Eight Hundred and Sixty Nine

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Frederick Knight
Sex and Age	Male 60
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Ironmonger
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Barking Braintree Essex
Whether First Attack	Yes
Age (if known) on First Attack	60
When and where previously under Care and Treatment	Dr Tomkin Witham Essex
Duration of existing Attack	6 weeks
Supposed Cause	Paralysis & Congestion of the Brain
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No ~~Year~~ ~~June~~ ~~1869~~
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Mary Ann Knight Ironmonger Barking Essex

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Mary Ann Knight
Occupation (if any), Ironmongers Wife
Place of Abode, Barking Essex
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Wife

MEDICAL CERTIFICAFE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of* the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a)

and being in actual practice as a (b)

(b) *Physician, surgeon, or apothecary, as the case may be.*

hereby certify that I, on the day of

(c) *Here insert the street and number of the house (if any), or other like particulars*

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) and that

the said

(e) Lunatic, or an idiot, or a person of unsound mind

is a (e) and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Sixty

MEDICAL CERTIFICATE.—**Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned,

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a)

and being in actual practice as a (b)

(b) *Physician, surgeon, or apothecary, as the case may be.*

hereby certify, that I on the day of

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) and that

the said

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Sixty

No 1151. Elizabeth Newby

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

THE RETREAT, NEAR YORK.

I hereby give you Notice, That Elizabeth Newby

was admitted into this (a) Hospital as a Private Patient, on the Day of September 1869, and I hereby transmit a Copy of the Order and Medical Certificates on which She was received (b).

(a) House or hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, J. Kitching M.D.
Superintendent of the
Friends' Retreat near York

(c) Superintendent or proprietor of ———.

Dated this Day of September
One Thousand Eight Hundred and Sixty nine.

To the Commissioners in Lunacy

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

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ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Elizabeth Newby whom I last saw at Crops Building, Bempty Road, York on the ~~twelfth~~ eleventh day of September (a) a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Elizabeth Newby.

Signed, *Name,* James Newby
Occupation (if any),
Place of Abode, Wells Square Trinity Lane York
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this Twenty Sixth Day of September One Thousand Eight Hundred and Sixty Nine

To John Kitching M.D
THE RETREAT, NEAR YORK.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Elizabeth Newby
Sex and Age	Female — 68 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Society of Friend
Religious Persuasion, as far as known	Crops Building Bempty Road, York
Previous Place of Abode	One slight attack previously
Whether First Attack	67 years
Age (if known) on First Attack	at Home, as above
When and where previously under Care and Treatment	about a month
Duration of existing Attack	Domestic trouble
Supposed Cause	no
Whether subject to Epilepsy	
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	none
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	James Newby York
Name and Address of Relative to whom Notice of Death to be sent	

(c) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (c) William Pumphrey
Occupation (if any), Proprietor of Private Lunatic Asylum
Place of Abode, Lawrence House York
Degree of Relationship (if any), or other circumstances of connexion with the Patient one of the Overseers of York Meeting of the Society of Friends

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8 10, 11, 12, 13.

I, the undersigned, William Pollett

being a (a) Member of the College of Surgeons England

and being in actual practice as a (b) Surgeon

hereby certify, that I, on the twenty third day of September

at (c) Grove Buildings, Lendal Road - York

in the County of York separately from any other Medical Practitioner,

personally examined Elizabeth Newby wife of James Newby

of (d) Grove Buildings Lendal Road York and that

the said Elizabeth Newby

is a (e) Lunatic and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She is low, melancholic & despondency, fancies that she cannot sleep from the noise of the fire & that she is eternally damned

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* William Pollett

Place of Abode, 24 Petergate - York

Dated this 23 day of Sept One Thousand Eight Hundred and Sixty three

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

I, the undersigned, Samuel William North

being a (a) Member of the Royal College of Surgeons England

and being in actual practice as a (b) Surgeon

hereby certify, that I on the 23 day of September 1863

at (c) Grove Buildings ~~Hook~~ County Road York

in the County of York separately from any other Medical Practitioner,

personally examined Elizabeth Newby wife of James Newby

of (d) Grove Buildings County Road York and that

the said Elizabeth Newby

is a (e) Lunatic and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Great Depression - Attempt to a Delusion that the Lord has no means of saving & that people are stealing from her

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* S. W. North

Place of Abode, 31 Castlegate York

Dated this 23 day of Sept One Thousand Eight Hundred and Sixty three

No 1152.

Frances Briggs.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

William Briggs
4 North Parade
Hull.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Frances Briggs

whom I last saw at Hull

on the Eleventh day of November (a)

a (b) Person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Frances Briggs

Signed, *Name,* William Briggs

Occupation (if any), Ironmonger

Place of Abode, 4 North Parade Hull

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this Eleventh Day of November

One Thousand Eight Hundred and Sixty Nine

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Frances Briggs
Sex and Age	Female aged forty four years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Wife of a Ironmonger
Religious persuasion, as far as known	Wesleyan
Previous Place of Abode	Hull
Whether First Attack	No
Age (if known) on First Attack	Forty three
When and where previously under Care and Treatment	Under private Care
Duration of existing Attack	Six Weeks
Supposed Cause	Change of life
Whether subject to Epilepsy	No.
Whether Suicidal	No!
Whether Dangerous to others	No!
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No!
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Briggs 4 North Parade Hull.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) William Briggs

Occupation (if any), Ironmonger

Place of Abode, 4 North Parade Hull

Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William White
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the eleventh day of November 1869
at (c) No 31 Castlegate York
in the County of York separately from any other Medical Practitioner,
personally examined Frances Briggs the wife of Wm Briggs
of (d) 4 York Parade Beverley Road Hull and that
the said Frances Briggs
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
Fixed Depression of spirits wandering conversation
Delusions

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, *Name,* S. W. White
Place of Abode, 31 Castlegate York
Dated this 11 day of November One Thousand Eight Hundred and Sixty nine

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William P White
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 9th day of November 1869
at (c) 24 Petergate York - my house
in the county of York separately from any other Medical Practitioner,
personally examined Frances Briggs the wife of William Briggs
of (d) 4 York Parade Beverley Road - Hull and that
the said Frances Briggs
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) She is now & de-
= pressed in spirits - trembling emaciated &
& fancies that she has terrible calamity
is hanging over her

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, *Name,* William P White
Place of Abode, 24 Petergate - York
Dated this 11 day of Nov One Thousand Eight Hundred and Sixty nine

No. 1153.
Joseph Unthank.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership.

2. Where was the place of birth of the patient?

North Shields

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? of a very nervous temperament and a little peculiar

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Fair share of understanding but was shy as to amount to eccentricity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

He was educated at the Friends School York.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Grocer and we believe of industrious habits but was at one time what would be considered rather fast, we believe. Steady latterly

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

A few months ago he had a disappointment in love and has had much anxiety in business

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? His Mothers brother is insane and one of his fathers uncles and two of his fathers Cousins have had temporary ~~insanity~~ attacks of insanity

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

See No 9.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

In his 36th year

15. What has been the duration of the present attack?

Three weeks but there have been some symptoms of aberration a few weeks longer

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

Extreme anxiety about his business not fully warranted by the circumstances

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

By increased anxiety as above

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No: but has mentioned self destruction & his Mother

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

I believe good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Complains a good deal of headache

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

He has been under Medical Care but has not taken much Medicine

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

There is considerable excitement which is evidently increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mary Lockhart
Spring Terrace
North Shields

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Joseph Unthank

whom I last saw ~~at~~ Near his Mothers house

on the this Morning 3rd day of 1st month 1870 (a)

a (b) Lunatic as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Lunatic

Subjoined is a statement respecting the said Joseph Unthank

Signed, *Name,* John R. Procter

Occupation (if any), Tanner

Place of Abode, North Shields

Degree of Relationship (if any), or other circumstances of connexion with the Patient Fathers Cousin

Dated this 3rd Day of 1st month

One Thousand Eight Hundred and ~~Sixty~~ Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Joseph Unthank
Sex and Age	Male, 35 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Grocer
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Sunderland
Whether First Attack	First attack
Age (if known) on First Attack	
When and where previously under Care and Treatment	
Duration of existing Attack	Three week duration
Supposed Cause	disappointments
Whether subject to Epilepsy	
Whether Suicidal	thought to be slightly so
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	has been examined
Name and Address of Relative to whom Notice of Death to be sent	Mary Unthank North Shields

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) John R. Procter

Occupation (if any), Tanner

Place of Abode, North Shields

Degree of Relationship (if any), or other circumstance of connexion with the Patient Fathers Cousin

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Robert Septimus Peart

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine, Surgeon, & Licentiate of the Apothecaries' Company

and being in actual practice as a (b) General Medical Practitioner

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the second day of January 1870.

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) 24 Spring Terrace North Shields

in the County of Northumberland separately from any other Medical Practitioner,

personally examined Joseph Muthank Grocer

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Spring Terrace North Shields and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Joseph Muthank

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds: viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) His attendant informed me during last night that he had given him 2/6 to endeavour to secure his good opinion, and that he (attendant) watched and tried to get out of the window and did not know where he would have gone to (if not stopped) Patient

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) His asking his mother whether he ought to throw himself into the River or make away with himself. His asking a companion whether he (Muthank) would give him a shilling to enable him to get out walking & making non-compliance with other singular requests

Name of Informant cannot be given.

Signed, Name, Robert Septimus Peart M.R.C.S.

Place of Abode, North Shields

Dated this second day of January One Thousand Eight Hundred and ~~Sixty~~ seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Thomas Stephens

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons of London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the Second day of January 1870

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) 24 Spring Terrace, North Shields

in the county of Northumberland separately from any other Medical Practitioner,

personally examined Joseph Muthank Grocer

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Spring Terrace North Shields and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Joseph Muthank

is a (e) person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

His incoherent talk and restless manner, and suspecting some one loose plotting against him, and unsuspecting that he was largely in debt

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Told by his Brother that got up at night and wandered about the house, and was one occasion was very violent and threatened to smash the door

Signed, Name, Thomas Stephens M.R.C.S.

Place of Abode, Tynemouth Square North Shields

Dated this Second day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy

I. Geo. Greene. being a General Practitioner. and being in actual practice as such, hereby Certify that I. on the 4th day of January 1840, Separately from any other Medical practitioner personally Examined Caroline Simpson Lomax, and that the said Caroline Simpson Lomax is a person of unsound Mind and a proper person to be taken Charge of. and detained under Care and Treatment, and that I have formed this Opinion upon the following grounds. viz.:-

1 - Facts indicating Insanity observed by myself - Her General aspect and Expression are peculiar - She talks incoherently about Spirits, horrors, blackbirds Crows &c imagines that her Cloak is an Idea - Spills her drink when offered to her, throws away her Bread - addresses a person who is now dead - asks for a Servant, who is now in London, & sent her to bed.

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2. Facts indicating Insanity Communicated to me by others.

Mrs. S. W. Lomax informs me that she is in the habit of tearing her clothes when she has the chance — Generally befouls her food — attempted to strike him frequently — pulls off his Spectacles and throws them on the ground — Yesterday she broke the Window — throws her bed & bedclothes on the floor and upsets the furniture.

Geo. Pearce. M.D. L.R.C.S.E & E

(Registered)

5 Auckland Terrace

Ramsey. Isle of Man

Dated this Seventh day of January

One Thousand eight-hundred and Seventy

I Walter D. Blucas being a Surgeon.
hereby certify that I have this day,
separately from any other medical
practitioner, visited and personally
examined Caroline Simpson Lomax
the person named in the accompanying
statement and order and that the
said Caroline Simpson Lomax is
an insane person and a proper
person to be confined, and that I
have formed this opinion from
the following facts viz—
Great incoherence of ideas - Hallucinations
and delusions respecting persons
about her, mistaking one for another.
Not able to feed herself throwing the
food about. Her appearance and
manner which indicate insanity

her previous history, as she has been twice before under restraint. Her memory is confused and her conversation almost entirely incoherent.

Walter S. Blucas M.R.C.S. Eng.

Ramsey Isle of Man

Jan. 7th 1890

No 1154. Caroline S. Lomax.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the place of birth of the patient? Liverpool

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

disposition excellent, character firm and decided; no eccentricity more than average understanding, but no precocity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Both, much; French, Latin, German, Italian, Mathematics: a most excellent private school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

None: industrious, temperate, exemplary always.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

29: one aged nearly 12.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Yes, literary composition.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Yes, to some extent.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Two previous attacks of insanity: otherwise very healthy

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

An aunt was at the Retreat more than once

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

1 Temporary opposition by her father to her wishes
2 The death of her father
3 Anxiety as on other accounts to also respecting her son's illness.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? About 22

15. What has been the duration of the present attack? About a fortnight from its apparent inception

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Twice: three months; six weeks: very similar to the present

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Complete: 2 years: 15 years.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? There was not much visible depression: no change in any way: neither was affected

19. What were the first decided symptoms of mental aberration?

Unusual style of talking, causeless and inopportune laughter.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Incoherent language, refusal to eat, overturning & throwing away of food, mistakes as to persons, hearing clothes; temperament very equable; no delusions are likely to be permanent.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Furniture and clothes suffer: a few blows with the hand, no dangerous attacks on life

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

has refused food, has injured herself, but not, I think, designedly.

23. What are the habits of the patient as regards personal cleanliness and decorum? Insanity has made an entire change in the first and appears to some extent to have induced an unconscious & unintentional neglect of the retention of proper covering

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Her health generally is good, the bowels generally require the help every day of one or two pills. P. Rhei gr. iv ss P. Spec. gr. ss. Heart was preceded by intermittent action of the heart but this was nearly cured.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. 1846 & 8: three months, six weeks: a perfect cure.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? Intermittent pulse was improved by Ferri Citr. gr. x Liq. Ammon Fort min. v. ter die, with Vini ℥iv in die. For the head & bowels Pot. Brom gr x. Magn Sulph ℥ss, T. Rhei co ℥j ter die, without effect.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Lucid short intervals: none

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

E. W. Cox Esq.
Fulwood
Aigburth
Liverpool

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Caroline Simpson Lomax whom I last saw at Liverpool on the eighth day of January (a) 1870 a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Caroline Simpson Lomax

Signed, *Name,* Charles Hudson Co

Occupation (if any), Cotton Broker

Place of Abode, Thrumbury Road N. Birkenhead

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this eighth Day of January

One Thousand Eight Hundred and ~~Sixty~~ Seventy.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Caroline Simpson Lomax
Sex and Age	Female. Age about forty Six
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Wife of a clergyman
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Ramsey Isle of man
Whether First Attack	Third
Age (if known) on First Attack	About twenty two -
When and where previously under Care and Treatment	at Dr Kitchs Sandywell Park Gloucester
Duration of existing Attack	About a fortnight
Supposed Cause	Anxiety & nursing her Son during illness
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	Occasionally
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Revd E W Lomax ma. Ramsey Isle of man

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Charles Hudson Co

Occupation (if any), Cotton Broker.

Place of Abode, Thrumbury Road North Birkenhead

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother.

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Geo. Greene

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine and Surgeon

and being in actual practice as a (b) General Practitioner

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the Seventh day of January 1870

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) Rose Cottage, Sandy Road, Ramsey

in the ~~County of~~ Isle of Man separately from any other Medical Practitioner,

personally examined Caroline Simpson Tomas

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Rose Cottage, Sandy Road, Ramsey and that

(e) Lunatic, or an idiot, or a person of unsound mind

the said Caroline Simpson Tomas

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

General appearance and Expression bewilder Refuses her drink when offered her, throws away her food talks incoherently & Gabbles Spirits. Tomas. Cries & laughs by turns her cloak & bonnet & Shawl dressed

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

The Rev. R. W. Tomas states that she tosses the furniture about the room, pitches bed & bedding into the floor - Strikes at her Sister & tries and flings them away - attempts to strike - breaks glass &c.

Signed, Name, Geo. Greene

Place of Abode, St Nicholas Teresa Mansion. Isle of Man

Dated this Seventh day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Walter D. Clucas

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the Seventh day of January 1870

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Rose Cottage Sandy Road, Ramsey

in the ~~County of~~ Isle of Man separately from any other Medical Practitioner,

personally examined Caroline Simpson Tomas

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Rose Cottage, Sandy Road Ramsey and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Caroline Simpson Tomas

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Great incoherence of speech and confusion of thought has delusions of various kinds - does not know ~~me~~ her friends & relatives, ~~Mr~~ knows her food about & is unable to feed herself - Manner and appearance indicative of insanity, constant restlessness and insomnia

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mr Tomas & her brother state that she has been in this condition (above described) for ~~about~~ a fortnight - & that she has been twice confined in an asylum before for the same reason.

Signed, Name, Walter D. Clucas

Place of Abode, Ramsey Isle of Man.

Dated this Seventh day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the 12th day of January 1870
at (c) The house of John Clarke Heslington Road York
in the County of York separately from any other Medical Practitioner,
personally examined Caroline Simpson Lomax wife of the Rev E W Lomax
of (d) Rose Cottage Ramsey Isle of Man and that
the said Caroline Simpson Lomax
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Rambling incoherent conversation

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, S. W. North
Place of Abode, 3 Heslington York
Dated this 12th day of January One Thousand Eight
Hundred and ~~Sixty~~ seventy.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Drapkin
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 12th day of January 1870
at (c) The house of John Clarke, Heslington Rd - York
in the County of York separately from any other Medical Practitioner,
personally examined Caroline Simpson Lomax wife of
of (d) Rose Cottage Ramsey Isle of Man and that
the said Caroline S. Lomax
is a (e) a Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Her manner is extremely excitable, her conversation quite incoherent - She states that she has just come from Alaska

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Drapkin.
Place of Abode, 13. High Petergate York
Dated this 12th day of January One Thousand Eight
Hundred ~~and Sixty~~ 70.

No 1155. Edwin Ladman.

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

THE RETREAT, NEAR YORK.

I hereby give you Notice, That

.

(a) House or hospital.

was admitted into this (a) as a Private Patient, on the Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(b) If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.

Signed, _____

(c) Superintendent or proprietor of ——.

(c) _____

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. 2, 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Edwin Cadman

whom I last saw at Westbourne House Sheffield

on the seventh day of January 1870 (a)

a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said Edwin Cadman.

Signed, Name, John Heaton Cadman
Occupation (if any), Barrister
Place of Abode, Sandal Magna - Wakefield -
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Son -

Dated this seventh Day of January
One Thousand Eight Hundred and ~~Sixty~~ seventy

To The Retreat, near York.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Edwin Cadman.
Sex and Age	male — 60 years.
Married, Single, or Widowed	married —
Condition of Life, and previous Occupation (if any)	gentleman - formerly merchant
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Westbourne House. Sheffield
Whether First Attack	yes
Age (if known) on First Attack	60 years
When and where previously under Care and Treatment	Westbourne House Sheffield
Duration of existing Attack	been coming on for 6 months.
Supposed Cause	mental anxiety
Whether subject to Epilepsy	No -
Whether Suicidal	No. -
Whether Dangerous to others	~~No~~ tendency to be violent
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	John Heaton Cadman Sandal Magna Wakefield

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) John Heaton Cadman
Occupation (if any), Barrister.
Place of Abode, Sandal Magna. Wakefield
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Son -

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Hall being a (a) Member of the Royal College of Surgeons of London and being in actual practice as a (b) General practitioner (Surgeon) hereby certify, that I, on the Seventh day of January 1870 at (c) Westbourne House, Sheffield in the County of York separately from any other Medical Practitioner, personally examined Edwin Cadman of (d) Westbourne House, Sheffield and that the said Edwin Cadman is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

some facts: General derangement of mental faculties, with greater or less excitement. Sometimes amounting to violence. When I last saw him he was examining amongst a number of letters for a book and on enquiring the reason required me I stating it, said he had an idea that he should [illegible] attended him for example first. Went to York to see his son on important business on his arrival there, he could not say why he had come

(g) *Here state the information, and from whom.*

From his Wife and two Sons.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, John Hall

Place of Abode, 40 Victoria St Sheffield

Dated this Seventh day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, *or* a person of unsound mind.

I, the undersigned, Arthur Jackson being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I on the seventh day of January 1870 at (c) Westbourne House Sheffield in the County of York separately from any other Medical Practitioner, personally examined Mr Edwin Cadman patient of (d) Westbourne House Sheffield and that the said Edwin Cadman is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

The delusion that his art in Sheffield: but in Hastings: and that his wife and family are away when they are here. The delusion that some one who goes near him steal his papers & upon which he searches them. The statement that he has ~~[illegible]~~ began in Sheffield since November when I saw him in the town on the 3rd and 5th January 1870.

(g) *Here state the information, and from whom.*

From Mr Heath Restless at night: his ignorance of what is going on around him and of what he does (except the all absorbing subject of writing papers — The delusion that his art in Sheffield Cadman

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Arthur Jackson M.R.C.S.

Place of Abode, S. James' Row. Sheffield

Dated this seventh day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy.

No 1156

Hannah Walker.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the place of birth of the patient?

Durham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Unable to say.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Unable to say —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation: habits industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married at 21, has had one child, living

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No. Conduct always irreproachable.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No illness except asthma & irregularity —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Unable to say.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

at her present age, between 71 & 72

15. What has been the duration of the present attack?

about 6 weeks. gradually growing

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Little rest. & great irritability.

19. What were the first decided symptoms of mental aberration?

Dread of poverty & suspicion of her nearest relatives
suspicions of being poisoned & robbed

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

As above, & false ideas of being engaged in law-suits. which do not exist.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Has threatened her life

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has Refuses food -

23. What are the habits of the patient as regards personal cleanliness and decorum?

Perfectly right.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes. Except in regards constipation

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

She has been under the Care of Mr Stanwell of Rochdale. & Boyd of Durham

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Disorder is increasing, occasional lucidity

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr Wm Fenton of Beaumonds.
Mr Rochdale is responsible.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Hannah Walker

whom I last saw at Beaumonds

on the 13th day of January 1870 (a)

a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Hannah Walker

Signed, Name, William Fenton

Occupation (if any), Banker

Place of Abode, Beaumonds

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Son-in-Law

Dated this 28th Day of January

One Thousand Eight Hundred and ~~Sixty~~ seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Hannah Walker
Sex and Age	Female 71 years old
Married, Single, or Widowed	Widowed.
Condition of Life, and previous Occupation (if any)	Her Husband was a Banker
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Gateshead & latterly Durham
Whether First Attack	1 first attack.
Age (if known) on First Attack	~~about a year ago~~ 71 years old
When and where previously under Care and Treatment	~~under the Care of Dr Charlton of Durham~~ Now here
Duration of existing Attack	about 6 weeks
Supposed Cause	not known.
Whether subject to Epilepsy	no
Whether Suicidal	has attempted threats against her life positively
Whether Dangerous to others	not yet
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	The patient will be examined
Name and Address of Relative to whom Notice of Death to be sent	William Fenton. Beaumonds near Rochdale

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) William Fenton

Occupation (if any), Banker

Place of Abode, Beaumonds near Rochdale

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Son-in-Law

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Edward John Jones

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine of the Society of Apothecaries London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) General Practitioner

hereby certify that I, on the 28th day of January 1870

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) 53 Hoghton St Southport

in the County of Lancaster separately from any other Medical Practitioner,

personally examined Mrs Walker, widow

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Durham Hamlet Mrs Freeman 58 Clayfield Hoghton Lane and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Mrs Walker

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) General irritable & excitable state believe she can also be to be in a comfortable home.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Threatened her nurse with violence - believes that she will die from want although well in good circumstance Mrs Freeman daughter / late Roberts nurse & nurse & daughter

Signed, Name, Edward John Jones M.R.C.S. &c.

Place of Abode, The Priory Southport Lancashire

Dated this 28th day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Rainford

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify, that I on the 28 day of January 1870

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Southport 53 Hoghton St

in the county of Lancaster separately from any other Medical Practitioner,

personally examined Mrs Walker & widow

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Durham Hamlet ~~widow~~ Mrs Freeman 58 Clayfield and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Mrs Walker

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Is irritable, easily excited, & nervous. Accuses those about her of wishing to poison her - refuses food & threatens with actions at law refuses food

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Restless & sleepless at night - says that her attendants have stolen her money & clothes - often refuses food saying they will poison her - Nurse & daughter informants Hannah Foster daughter late & only nurse.

Signed, Name, W Rainford M.R.C.S. &c.

Place of Abode, Portsea

Dated this 28 day of January One Thousand Eight Hundred and ~~Sixty~~ 70

No 1157.

E. E. Clay

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.

2. Where was the place of birth of the patient? Dewsbury

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? was always of desponding turn of mind

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? A person of good sense and quiet, somewhat reserved manners.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Had an ordinary middle class education in schools.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. She has kept her father's house for many years. Has always industrious temperate and regular.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Unmarried.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Has had some desponding notions on religious subjects.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Her mother was three months in an asylum for the insane, after the birth of the present patient.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Possibly some little over-exertion & over solicitude for others.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? ten days ago for the first time. 37 years of age.

15. What has been the duration of the present attack? Ten days about.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Not before

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

For a fortnight the sleep was uncertain and of short duration, occasionally the nights were sleepless.

19. What were the first decided symptoms of mental aberration?

Great nervous excitement and incoherent talk.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Has since said that those about her intended to poison her.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? She has only once shown destructive violence, having suddenly started up from bed and broken the window, cutting her hand.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

She has on two or three occasions allowed involuntary action of bowels & bladder.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Her bodily health is pretty good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

She has taken sedatives to procure sleep at first with good effect latterly with none. Tonics.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

There are lucid intervals of irregular duration. The disorder is increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr. Clay. Carr Lodge. Dewsbury

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive E E Clay whom I last saw at my House Carr Lodge Dewsbury on the fourth day of March 1870 (a) a Person of unsound Mind (b) as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said E. E. Clay

Signed, *Name,* Benjamin Clay
Occupation (if any), Worstapler
Place of Abode, Carr Lodge Dewsbury
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this fourth Day of March
One Thousand Eight Hundred and ~~Sixty~~ Seventy

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Ellen Elizabeth Clay
Sex and Age	Female thirty seven
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	my Housekeeper
Religious persuasion, as far as known	Protestant Independent
Previous Place of Abode	Dewsbury
Whether First Attack	yes
Age (if known) on First Attack	Thirty seven
When and where previously under Care and Treatment	never
Duration of existing Attack	ten days
Supposed Cause	not known
Whether subject to Epilepsy	not
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	already done.
Name and Address of Relative to whom Notice of Death to be sent	Benjamin Clay Dewsbury

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Benjamin Clay
Occupation (if any), Worstapler
Place of Abode, Carr Lodge Dewsbury
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned George Samuel Rhodes

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Licentiate of Apothecaries' Company & M. R. C. S.

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify that I, on the third day of March 1870

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) Carr Lodge Halifax Road Dewsbury

in the County of York separately from any other Medical Practitioner,

personally examined Ellen Elizabeth Clay

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Carr Lodge Dewsbury and that

the said Ellen Elizabeth Clay

(e) Lunatic, or an idiot, or a person of unsound mind

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She has fits of unusual excitement and most irrational talk and has become, contrary to the habits of a whole life, quite regardless of appearances personal or other.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) by her Aunt Eliza Dodgshun who says that being hitherto a most particular person she has recently allowed the bowels to act in bed without restraint.

Signed, Name, Geo. S. Rhodes, Surgeon

Place of Abode, Manor House. Dewsbury.

Dated this 4th day of March One Thousand Eight Hundred and ~~Sixty~~ Seventy

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Henry Hemingway

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) ~~Registered~~ General Practitioner

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) general practitioner

hereby certify, that I on the fourth day of March 1870

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Carr Lodge in Dewsbury

in the county of York separately from any other Medical Practitioner,

personally examined Ellen Elizabeth Clay

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Carr Lodge, Dewsbury and that

the said Ellen Elizabeth Clay

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She is very silent and reticent to me and refuses to answer her pills and drops and is almost entirely without recovery in her general appearance as to leave no doubt of the mentality of intellect.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Henry Hemingway

Place of Abode, Dewsbury General practitioner

Dated this 4th day of March One Thousand Eight Hundred and ~~Sixty~~ Seventy

No 1159.

James Newby.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Newby

whom I last saw ~~at~~ in Laurence Street York

on the Fifth day of May 1870 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said James Newby

Signed, *Name,* Henry King

Occupation (if any), Grocer &c

Place of Abode, Laurence Street York

Degree of Relationship (if any), or other circumstances of connexion with the Patient } one of the Overseers of York Meeting

Dated this Seventh Day of May

One Thousand Eight Hundred and ~~Sixty~~ Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	James Newby
Sex and Age	Male 59
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	no occupation for several years past
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	in lodging Not East Riding Parade, York
Whether First Attack	no
Age (if known) on First Attack	53. 54.
When and where previously under Care and Treatment	at The Friends Retreat from 1864 to 1866
Duration of existing Attack	Uncertain.
Supposed Cause	Unknown.
Whether subject to Epilepsy	Not subject to Epilepsy
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	* Henry King Laurence Street York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry King

Occupation (if any), See above

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

* James Newby wife is a patient in the Retreat, we know of no relation to whom this information should be sent.

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the 14th day of May 1870

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) No 1 East Riding Pontefract in the County of York

separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined James Nicholson Clerk of no occupation formerly a Farmer and that

(e) Lunatic, or an idiot, or a person of unsound mind

the said James Nicholson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Dementia - his conversation & wandering his manner & gesture - he uses the most extraordinary & incoherent expressions - he says he is insane & that he wishes to be taken care of - that he does not feel able to work

(g) Here state the information, and from whom.

2. ~~Other facts (if any)~~ indicating Insanity communicated to me by others (g) as his friends - that he feels that his mind has gone & that he would be better in an Asylum

Signed, Name, S. W. North

Place of Abode, 31 Castlegate York

Dated this 14th day of May One Thousand Eight Hundred and Sixty seventy.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Procter

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the 14th day of May 1870

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) New House Pontefract - York in the county of York

separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined James Nicholson Clerk

of (d) No 1 East Riding Pontefract and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said James Nicholson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) From the ~~Exhibition~~ Exhibition of the recollection as to events & circumstances - he is disordering about his business, state of feels that he has any practical control over himself

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, W. Procter

Place of Abode, 2 Pontefract York

Dated this 14th day of May One Thousand Eight Hundred and ~~Sixty~~ seventy

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

For the Directors of Cork Monthly Meeting
Henry King

1160

June 3rd 1870

I having Bathed and Examined Thomas Henery Allis I find the Bodily condition thin and very much Bruised on arms, hips & knees & sides one eye much discoloured

Samuel Minds

Attendant

1570

No 1158.
Harriet Hirst

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Hurst The Cricket Selby

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Harriet Hirst

whom I last saw at Thorpe Arch

on the Seventh day of April (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Harriet Hirst

Signed, *Name,* Jane Hirst

Occupation (if any), Wife

Place of Abode, The Crescent Selby

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this Seventh Day of April

One Thousand Eight Hundred and Sixty Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Harriet Hirst
Sex and Age	Female aged 52 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	Independent
Previous Place of Abode	Selby
Whether First Attack	Yes
Age (if known) on First Attack	51
When and where previously under Care and Treatment	No where
Duration of existing Attack	9 Months
Supposed Cause	Change of life
Whether subject to Epilepsy	No
Whether Suicidal	Do not think
Whether Dangerous to others	Violent
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Jane Hirst The Crescent Selby

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Jane Hirst The Crescent Selby

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, *ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned William Potter being a (a) Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the 5th day of April at (c) the House of the Clerk Heslington Road in the County of York separately from any other Medical Practitioner, personally examined Harriet Hirst Spinster of (d) No Crescent Selby and that the said Harriet Hirst is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She is very violent & excited & irrational in her conversation talks at the most disjointed

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Potter
Place of Abode, 14 Petergate
Dated this 5th day of April One Thousand Eight Hundred and ~~Sixty~~ Forty

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, *ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Samuel William Tuke being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the 2nd day of April 1890 at (c) the house of John Clarke Heslington Road York in the county of York separately from any other Medical Practitioner, personally examined Harriet Hirst Spinster of (d) No Crescent Selby and that the said Harriet Hirst is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Great excitement Rambling incoherent conversation

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, S. W. Tuke
Place of Abode, 31 Castlegate York
Dated this 2nd day of April One Thousand Eight Hundred and ~~Sixty~~ Seventy.

No 1160.

Thomas Henry Allis.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership

2. Where was the place of birth of the patient?

Tewkesbury Gloucestershire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

none

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

nothing out the usual way

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at Ackworth & York

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

To the Grocery trade — industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

a decided taste for Natural History

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

he has had great losses

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

no

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

an instance of insanity occurred two generations back

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Pecuniary difficulties, added to bodily ailment

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

about 53

15. What has been the duration of the present attack?

two to three week

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

became fervent irritable

19. What were the first decided symptoms of mental aberration?

irrational schemes for raising funds

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

in the delusion that he is about to become immensely rich

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

not that we know of

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

no

23. What are the habits of the patient as regards personal cleanliness and decorum?

correct

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

no

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

increased within the last few days

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas Allis
Chadwick York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Thomas Henry Allis whom I last saw at Osbaldwick near York — on the thirtieth day of May (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Thomas Henry Allis

Signed, *Name,* Thomas Allis
Occupation (if any), Gentleman
Place of Abode, Osbaldwick near York
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this third Day of June
One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Thomas Henry Allis
Sex and Age	male — 53 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Out of Business, formerly Commercial Traveller
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Osbaldwick nr York
Whether First Attack	First attack
Age (if known) on First Attack	52 & 53
When and where previously under Care and Treatment	no where
Duration of existing Attack	two & three week
Supposed Cause	Physical disease
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	Thos Allis, Osbaldwick nr York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Thomas Allis
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned
being a (a) Licentiate of the Royal College of Surgeons in Ireland and of the King & Queen's College of Physicians Ireland
and being in actual practice as a (b) a Surgeon
hereby certify that I, on the 2nd day of June 1870
at (c) the Bradfor work house
in the County of York separately from any other Medical Practitioner,
personally examined Thomas Henry Allis
of (d) Osbaldwick near York and that
the said Thomas Henry Allis
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
He spoke of being in possession of a large income whereas he has not anything of his own. That he is going to be married to a girl of 18 years of age and after that he wished to die. He talked at times very incoherently.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mr Parsons the nurse informs me that he said that he had often been at the workhouse before and he imagined that it was an old friend's house and also that Mr Parsons was a friend of his and that he was going to York next day with Mr Parsons and this other gentleman to very salmon trout and then he was going to be married to a girl of 18 years of age who had a large fortune. That he was very violent during the night and attempted to strangle the nurse.

Signed, *Name,* John R. McGee LRCS.I & LK2CPI
Place of Abode, Wilton House Bradford

Dated this 2nd day of June One Thousand Eight Hundred and Seventy

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Halstead Greenwood Buckley
being a (a) Licentiate of the Royal College of Surgeons England
and being in actual practice as a (b) Surgeon
hereby certify, that I on the third day of June 1871
at (c) the Bradford workhouse
in the county of York separately from any other Medical Practitioner,
personally examined Thomas Henry Allis
of (d) Osbaldwick near York and that
the said Thomas Henry Allis
is a (e) a person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He spoke of having made a thousand pound last night in selling pins & pencils, — that he had received a large sum of money from the London Industrial Society. That he was going to be married & have a million of money — & that talked incoherently generally about various

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
gentlemen he knew & had been at school with.

Signed, *Name,* William H. G. Buckley MRCSL, LSAC
Place of Abode, 93 Little Horton Lane Bradford

Dated this third day of June One Thousand Eight Hundred and Seventy

No 1161.

Ann Watson.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Watson

whom I last saw at 8 Yoakley's Buildings Stoke Newington on the Twenty Eighth day of 5mo (May) 1870 (a)

a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Ann Watson

Signed, *Name,* Chas H Warner

Occupation (if any), Pharmaceutical Chemist

Place of Abode, 1 Finsbury Square London E.C.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Treasurer of Bloomsbury House Monthly Meeting

Dated this Seventeenth Day of 6mo June 1870

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Ann Watson
Sex and Age	Female – about 84 (remain within a year or 2)
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	formerly Domestic Servant – latterly inmate of Almshouse
Religious persuasion, as far as known	Friend
Previous Place of Abode	Yoakley's Buildings, Stoke Newington
Whether First Attack	No
Age (if known) on First Attack	Somewhere between 80 & 90
When and where previously under Care and Treatment	York Retreat
Duration of existing Attack	6 or 8 months
Supposed Cause	Old Age, taken in connection with previous attack no other Cause is known.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	No relative – notice to Edward Marsh, 12 Bishopsgate Without, London, E.C.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Chas H Warner

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient as above

× Some answer must be given

×× Wants filling in –

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Robert Humphry Cooke

being a (a) Fellow of the Royal College of Surgeons

and being in actual practice as a (b) Surgeon

hereby certify that I, on the fifteenth day of June 1870

at (c) 8 Yoakley's Building, Stoke Newington

in the County of Middlesex separately from any other Medical Practitioner,

personally examined Ann Watson

of (d) Yoakley's Building (aforesaid) and that

the said Ann Watson

is a (e) Lunatic and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) both while I was in the room with her and when I was in the adjoining room, and she was alone, under an unexplained sense of breath she was audibly and articulately crying on God and Christ to help her: the prayers passing uttered appeared on occasions to be part into curses and profane invectives as if she imagined some one else present with her "Why don't you go home? God damn you" "Why don't you go home? I hate all of you?" *

2. Other facts (if any) indicating Insanity communicated to me by others (g)

it was stated to me by Mr Ann Marshall who is in attendance that night and day these exclamations continue so as to be very disturbing to the neighbours

Signed, Name, Robert H Cooke F.R.C.S.

Place of Abode, Church Street, Stoke Newington

Dated this fifteenth day of June One Thousand Eight Hundred and Seventy.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

* Neither declining at home heard in ordinary terms - that of medical profession - added with mocha sensation in the abdomen

† name yourself Ann Marshall (Robert H Cooke)

X

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Joseph John Fox

being a (a) Member of the Royal Colleges of Surgeons & Licentiates of the Society of Apothecaries

and being in actual practice as a (b) General Practitioner

hereby certify, that I on the fifteenth day of both months (June) 1870

at (c) 8 Yoakley's Buildings, Stoke Newington

in the county of Middlesex separately from any other Medical Practitioner,

personally examined Ann Watson

of (d) Yoakley's Buildings aforesaid and that

the said Ann Watson

is a (e) Lunatic and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

Delusions that she was to be hanged — Complete change in her manner & behaviour from what she used to be — Anger at every one that approaches her, manifested in swearing language and personal violence.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Signed, Name, Joseph John Fox

Place of Abode, Landship Road, Stoke Newington

Dated this Sixteenth day of June One Thousand Eight Hundred and Seventy

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

She is a member of the Society of Friends

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Her occupation was that of Domestic Servant — Her habits were regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No — so far as her friends are aware

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Not any — so far as her friends are aware

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

It has come on gradually during the past 6 or 8 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

She has had one attack before — 20 or 25 years ago; — the records of the York Retreat will show the time

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

She has been quite well, in the interval time her former attack —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

For 2 or 3 years past, she has gradually become more irritable

19. What were the first decided symptoms of mental aberration?

Anger & aversion towards those around her — and idea of having committed the unpardonable sin.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She remains in bed — abuses those who come near her — uses bad language. Her chief delusions seem to be that she is to be hanged; — that she is defrauded of her money —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Not any

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

She is indifferent to personal cleanliness — but not given to what are called unclean habits.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Her bodily health is consistent with her advanced age

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Only in York Retreat, at the period referred to in answer in Question 16

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

She has been carefully watched & attended to — Such treatment has been used as seemed likely to mitigate her excitement, and to help the bodily functions when required.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

On the whole, she is rather less noisy & excited than she was; — there are no distinct lucid intervals.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Devonshire House monthly meeting
We wish our others as usual
to Edward Marsh Jr —
13 Bishopsgate Without
London E.C.

No 1162 W. H. Horniman.

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

(a) House or hospital.

was admitted into this (a) as a Private Patient, on the

Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) Superintendent or proprietor of ———.

(c) _____

_____

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive William Henry Horniman whom I last saw at the Queen's Hotel Friar St. Reading, Berks on the Fifth day of July 1870 (a) a (b) person of unsound mind as a Patient into your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said William Henry Horniman

Signed, *Name,* John Horniman
Occupation (if any), Gentleman
Place of Abode, Coombe Cliffe House, Croydon, Surrey
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this Fifth Day of July
One Thousand Eight Hundred and ~~Sixty~~ Seventy

To Dr Kitching
(c) Superintendant (d) The Retreat, York

(c) Proprietor or superintendent of ——.
(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	William Henry Horniman
Sex and Age	male — thirty eight years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Merchant
Religious Persuasion, as far as known	Society of Friend
Previous Place of Abode	41 London Road Croydon Surrey
Whether First Attack	the first
Age (if known) on First Attack	thirty eight years
When and where previously under Care and Treatment	— nowhere
Duration of existing Attack	four days
Supposed Cause	pressure of business
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	John Horniman, Father, Coombe Cliffe House Croydon, Surrey.

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) John Horniman
Occupation (if any), Gentleman
Place of Abode, Coombe Cliffe House, Croydon
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Richard Thomas Woodhouse M.D. being a (a) a graduate of Edin. - Registered Physician and being in actual practice as a (b) a Physician hereby certify, that I, on the fifth day of July 1870 at (c) ~~18~~ Friar St Reading (the Queens Hotel) in the County of Berks separately from any other Medical Practitioner, personally examined William Henry Horniman of (d) 41 London Road Croydon and that the said William Henry Horniman is a (e) person of unsound mind ~~and a proper~~ Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Vociferating furiously and talking incoherently - and all the appearances of acute Mania -

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Threatening to throw himself out of the window (from his Brother Frederick)

Signed, Name, Richard Thomas Woodhouse

Place of Abode, 18 Friar Street, Reading, Berks

Dated this fifth day of July One Thousand Eight Hundred and ~~Sixty~~ Seventy.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Charles Vines, Surgeon being a (a) Fellow of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the fifth day of July 1870 at (c) The Queens Hotel Friar St. Reading in the County of Berks separately from any other Medical Practitioner, personally examined William Henry Horniman of (d) 41 London Road Croydon Surrey and that the said William Henry Horniman is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is very excited, shouts out loudly, labours under delusions, jumps out of bed apparently with - a view to escape by the window

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) He refuses to take either food or medicine - communicated by his cousin Henry Horniman -

Signed, Name, Charles Vines

Place of Abode, 160 Friar St. Reading Berks

Dated this fifth day of July One Thousand Eight Hundred and ~~Sixty~~ Seventy -

No 1163

James Clay

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Slightly connected.

2. Where was the place of birth of the patient? Dewsbury

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Reserved.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Nothing peculiar.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. An average

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at 23 – Children 5 – Eldest six years.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Sister been previously affected in the mind –

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Congestion of Liver.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Mother & Sister.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Mental Anxiety.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 30.

15. What has been the duration of the present attack? Four or five days.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? First attack.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Depressed spirits & very little sleep.

19. What were the first decided symptoms of mental aberration? His saying he had revelations from God.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Religious delusions.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? He is somewhat determined

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No.

23. What are the habits of the patient as regards personal cleanliness and decorum? Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
He has suffered from Congestion of liver & brain.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Never

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Has been attended by two physicians & one surgeon - Ordinary treatment.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Mental aberration rapidly advancing - lucid intervals disappearing consequently mental disturbance continuous.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Clay
North Gate
Dewsbury

Rec'd in Law. John Walker
Dewsbury Mills.

Uncle to the Patient.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Clay whom I last saw at Carr Lodge. Dewsbury, on the Fifteenth day of September (a) a (b) Lunatic as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said James Clay Imt.

Signed, *Name,* James Clay

Occupation (if any), Linen & Woollen Draper

Place of Abode, Dewsbury

Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle.

Dated this Fifteenth Day of September

One Thousand Eight Hundred and Seventy.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	James Clay
Sex and Age	Male. aged 30 years.
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Wool Merchant.
Religious persuasion, as far as known	Congregationalist
Previous Place of Abode	Dewsbury.
Whether First Attack	Yes.
Age (if known) on First Attack	About 30 years.
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	About a week.
Supposed Cause	Mental Anxiety.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No. but violent.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Mrs James Clay. Carr Lodge. Dewsbury.

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) James Clay

Occupation (if any), Linen & Woollen Draper

Place of Abode, Dewsbury

Degree of Relationship (if any), or other circumstance of connexion with the Patient Uncle

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Charles Alfred Hemingway
being a (a) M.R.C.S. Eng. & L.S.A. Lond. & registered
under Medical Act
and being in actual practice as a (b) General Medical practitioner
hereby certify that I, on the 14th day of September
at (c) Carr Lodge near Dewsbury
in the County of York separately from any other Medical Practitioner,
personally examined James Clay Woolstapler and that
of (d) Carr Lodge Dewsbury
the said James Clay
is a (e) a person of unsound Mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f)
Incoherent talking — [redacted] of
a character like religious rhapsody — says
his brain is dipping & has had revelations
from God.
2. Other facts (if any) indicating Insanity communicated to me by others (g) his Sister Catherine
Clay
Wanted the window opening
to cool his brain. —

Signed, Name, C.A. Hemingway
Place of Abode, Surgeon Dewsbury
Dated this 14th day of September One Thousand Eight
Hundred and Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Geo. S. Rhodes
being a (a) Licentiate of the Apothecaries Company
& M.R.C.S. Eng
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 15th day of September 1870
at (c) Carr Lodge near Dewsbury
in the county of York separately from any other Medical Practitioner,
personally examined James Clay
of (d) Carr Lodge, Dewsbury. woolstapler and that
the said James Clay
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f)
He talks incessantly and altogether irrationally. Exhibits frequent violent & irregular impulses.
2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Geo. S. Rhodes
Place of Abode, Surgeon Dewsbury
Dated this 15th day of September One Thousand Eight
Hundred and Seventy

No 1164
Richard Sedgwick.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.

2. Where was the place of birth of the patient? Dent. W. R of York.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? His Father was Vicar of the Parish of Dent, led the ordinary life of a Schoolboy, & then went to College. & about a year after having his B. A. degree at Cambridge was ordained & a living in Norwich: & shortly afterwards married.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? He was decidedly clever, but in the latter part of his school life, & at college his health was not strong, & several times he broke down with the hard work in preparing for an examination.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He was at a preparatory school near Kendal as a young boy. Then at Sedbergh Grammar School, & at 19 years of age went to Trinity College, Cambridge.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
He was educated for a Clergyman. He was always perfectly temperate & regular & never neglected his work —

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
He is now 43 years of age, he was married at 25 years of age. He has Eight children living, & one died about 8 years ago. The eldest is 17 years of age the youngest 7 years.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Possibly he over worked himself at College, but he seemed completely to recover his strength & health, the head at one time had work in his Parish at Norwich, & wrote 2 Sermons every week. Sometimes he complained of finding the work almost too much.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? When he lived at Norwich he used to suffer from indigestion, which he said made him at times almost incapable of hard brain-work.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? None is known either on the Father or Mother's side, but he had an uncle who was not perfectly in possession of his faculties tho' hardly to be called insane.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Some or Five years before his attack there was a fearful outbreak of Cholera in his parish in Norwich. The people were very poor & helpless, he had no fear of infection but devoted himself to them night & day, often helping to place them in their coffins — After all was over & the disease passed, his health gave way, his stomach became disordered, he tried the "water cure", but he never recovered strong in health, & able to bear mental work so well, or for so long together as

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Abt 33 years of age

15. What has been the duration of the present attack? He has been under care for about seven years & a quarter —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? The first attack has never subsided.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
For more than 2 years before the attack his temper became irritable. He was growing suspicious of others: & sometimes took offence unreasonably: & he slept very badly & used to get up at night thinking he heard housebreakers.

19. What were the first decided symptoms of mental aberration?
Nothing in particular first to his sister & then to his wife. to whom ever since their marriage he had been devotedly attached.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
He thinks himself sane, but the victim of a conspiracy. & originally confined The desire of recovering his liberty is his great anxiety. Sometimes he thinks he has heard voices in the walls —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
No.

23. What are the habits of the patient as regards personal cleanliness and decorum?
I believe his habits are entirely those of a gentleman, except that he is untidy in his dress.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. He is in very good health, but has grown very stout the last 3 years, which was not natural. Possibly he requires more exercise. He was in the habit of taking very long walks before his illness.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. He was first placed under the care of Dr Wood, Kensington House London. There he remained 2 years. Then he was removed to Haydock Lodge near Newton le Willows where he has since remained.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
I do not know that any means have been used

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
The disorder is nearly stationary, certainly he does not improve — I have been informed that if contradicted or opposed he becomes irritable & angry.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

His Uncle Professor Sedgwick. Cambridge pays the bills, but the accounts & receipts are to be sent to his sister: who is the Committee of his Person appointed by the Lord Chancellor. her address is

Miss Sedgwick
Longcliffe
Settle — Yorkshire

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive the Revd. Richard Sedgwick whom I last saw at Haydock Lodge Newton-le-Willows on the 21st day of October 1870 (a)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Richard Sedgwick

Signed, *Name,* Margaret Isabella Sedgwick
Occupation (if any), —
Place of Abode, Langcliffe – Settle. Yorkshire
Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

X

Dated this twenty first Day of October
One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Richard Sedgwick
Sex and Age	Male. 43 years
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Vicar of Dent. and J. P for the W. R. of York.
Religious persuasion, as far as known	Clergyman of the Church of England.
Previous Place of Abode	Dent. Yorkshire
Whether First Attack	Yes
Age (if known) on First Attack	35 years
When and where previously under Care and Treatment	2 years at Remington House London 5½ years at Haydock Lodge Newton-le-Willows
Duration of existing Attack	The attack came on gradually; in confinement 7½ years
Supposed Cause	Over work at Norwich in part. during an attack of Cholera in the parish
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Yes. April 13. 1864
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Miss Sedgwick. Langcliffe – Settle. Yorkshire

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Margaret Isabella Sedgwick
Occupation (if any), —
Place of Abode, Langcliffe. Settle
Degree of Relationship (if any), or other circumstance of connexion with the Patient Sister.

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name*, _____

Place of Abode, _____

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name*, _____

Place of Abode, _____

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

No 1165
George Joseph Littlewood.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? was a birthright member & is still connected with friends

2. Where was the place of birth of the patient? Moorgate East Retford

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? rather of a nervous tendency

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Ackworth School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Grocer very industrious temperate and of regular conduct since the alteration not quite so temperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Widower married about 32 no Children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
The last three Months for the butchering

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
Only fainting fits

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
Great bodily weakness

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
No not on either side

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
The sudden death) after a short marriage his wife & excitement in business

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 32

15. What has been the duration of the present attack?
6 Weeks. The last two worse

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Very low. Temper high different to what he used to be.

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Threatings

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
We think not.

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Complains of great pain in the head

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
No.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing worse towards evening

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

George Littlewood
Grocer
Retford

S. A. Littlewood
West Field
East Retford.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive George Joseph Littlewood whom I last saw at Retford on the 28th day of 10 Month (a) a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said George Joseph Littlewood

Signed, Name, George Littlewood
Occupation (if any), Seedsman
Place of Abode, Church Gate, Retford
Degree of Relationship (if any), or other circumstances of connexion with the Patient } His father

Dated this 28th Day of 10 Month
One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	George Joseph Littlewood
Sex and Age	Age 34.
Married, Single, or Widowed	Widower
Condition of Life, and previous Occupation (if any)	Grocer & Pork Butcher &c
Religious persuasion, as far as known	Friends
Previous Place of Abode	Retford
Whether First Attack	3rd
Age (if known) on First Attack	32
When and where previously under Care and Treatment	At Home under Dr Marshall
Duration of existing Attack	6 Weeks
Supposed Cause	Excitement in business &c &c.
Whether subject to Epilepsy	Fainting fits
Whether Suicidal	We think not.
Whether Dangerous to others	Yes when provoked.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	George Littlewood Churchgate Retford

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) Sarah Anne Littlewood
Occupation (if any), Grocer &c
Place of Abode, West Field - West Retford
Degree of Relationship (if any), or other circumstance of connexion with the Patient } His Sister

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned William Pritchard
being a (a) Member of the College of Surgeons & Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify that I, on the Twenty Eighth day of October 1870
at (c) The Square - East Retford
in the County of Nottingham separately from any other Medical Practitioner,
personally examined George Joseph Littlewood and that
of (d) Church Gate - East Retford - Grocer
the said George Joseph Littlewood
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Great excitement - Sleeplessness - Making imaginary purchases of Cattle &c

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Totally altered manner - shouting after persons in the Street - declaring he has made purchases which have not taken place and the threatened use of a Knife to a Neighbour

Communicated by his brother in Law Anthony Walker of Grocer Gate East Retford

Signed, *Name,* William Pritchard
Place of Abode, Church Gate - East Retford
Dated this Twenty Eighth day of October One Thousand Eight Hundred and Seventy

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an Idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Saml. Marshall
being a (a) Member of the Royal College of Surgeons
& L.S.A.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 28th day of October
at (c) Church Gate East Retford
in the county of Nottingham separately from any other Medical Practitioner,
personally examined George Joseph Littlewood
of (d) East Retford Grocer and that
the said George Joseph Littlewood
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
Great excitement & wandering about & suspected that he has bought many beasts & sheep from persons passing & selling them at his market

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Totally altered manner - running & shouting after people, thinking people cut his throat

Communicated by his own Family & Friends.

Signed, *Name,* Saml. Marshall M.R.C.S. L.S.A.
Place of Abode, East Retford
Dated this 28th day of October One Thousand Eight Hundred and Seventy.

Name of Patient George Joseph Littlewood
Residence & Occupation Church Gate East Retford Grocer
By his brother in Law Anthony Walker.
By William Cobb his Servant.

1766.

I baithed and
Esemanid, Miss McLaren
on the 9th of Noounber
No Markes nor bruises
J Dean

400

No 1166.
Helen Mc Laren

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No —

2. Where was the place of birth of the patient?

Edinburgh

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

A little reserved - no decided peculiarity - keen observer of character - quiet humour - no precocity of intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Nothing particular to note under this head
Education at day schools for middle classes in Edinr

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation - Strictly temperate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Complaint of Noises in the head - & partial deafness (if rightly remembered)

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

None — that can be ascertained

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

33

15. What has been the duration of the present attack?

four years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

first

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

I believe she was observed more depressed

19. What were the first decided symptoms of mental aberration?

It was very sudden — and decided. Had a hallucination that she was "the beast" in Revelation

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Has the delusion that other people see her thoughts and that they injure others: ~~the~~ that she is unwedly to live

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Much in disposition to take food — never any decided attempts to injure herself — but spoke of it — Is excited by the sight of a knife — Has put her head under the mattress repeatedly

23. What are the habits of the patient as regards personal cleanliness and decorum?

Quite correct so far as known

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. I believe the monthly periods have been much if not constantly suppressed — the had one or more in the Spring, when she became less restless. Her bowels have occasionally been slow of motion — her pulse is not strong

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Was for ~~[illegible]~~ 2 years and 8 months in a private asylum, was improved from the first violent form of attack, and at the end of that period was removed to private family. Has made no improvement since

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Cannot say

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary — Any increase of restlessness or excitement seems to be in connection with — enquiry answered No 24

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

David M Laren — 36 Greenhill Gardens, Edinburgh

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Helen M Laren

whom I last saw at Garvald, Haddingtonshire

on the 1st day of this present November (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Helen M Laren

Signed, *Name,* Catharine Ann M'Laren

Occupation (if any),

Place of Abode, 1 Morningside Bank, Edinburgh

Degree of Relationship (if any) or other circumstances of connexion with the Patient Sister

Dated this 5th Day of November

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Helen M'Laren
Sex and Age	Female - born May 1833 - age 37
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Independent means
Religious persuasion, as far as known	Congregationalist
Previous Place of Abode	Edinburgh
Whether First Attack	Yes
Age (if known) on First Attack	37
When and where previously under Care and Treatment	Craighton Hall, Edinr 29 Sept - 12 Nov 1870 in private family
Duration of existing Attack	Four years
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	Threatens her own life - Reasons can at present [illegible]
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	David M'Laren 36 Greenhill Gardens Edinr

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) David M'Laren

Occupation (if any), Merchant

Place of Abode, 36 Greenhill Gardens

Degree of Relationship (if any), or other circumstance of connexion with the Patient Per Letter

402

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Procter
being a (a) member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Eighth day of November
at (c) 31 Castlegate - York
in the County of York separately from any other Medical Practitioner,
personally examined Helen Hallinan, Spinster, no occup
of (d) Gaspole - Haddingtonshire and that
the said Helen Hallinan
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) It is with great difficulty she is got to answer questions, & she indagines that her friends are bidy injured & the statements with regard to them

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Signed, *Name,* W. Procter
Place of Abode, 31 Castlegate - York
Dated this Eighth day of November One Thousand Eight Hundred and Seventy

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the eighth day of November
at (c) 31 Castlegate York
in the county of York separately from any other Medical Practitioner,
personally examined Helen Hallinan Spinster. no occupation
of (d) Savile Hedding Surgeon and that
the said Helen Hallinan W. Larkin
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
She is quite unable to sustain any connected
first Symptoms I observed. She is
labouring under great delusion with regard to her family

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York
Dated this 8th day of Nov 2 One Thousand Eight Hundred and Seventy

No. 1167.

Tuffen West.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Both

2. Where was the place of birth of the patient? Leeds Yorks.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Not known

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Supposed to have been always intelligent

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Educated in the Friends School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Surgeon — always well conducted

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 38

15. What has been the duration of the present attack? 2 Weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? once before — similar but

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
10 years —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Religious depression for a short time — Slight Excitement for a few weeks

19. What were the first decided symptoms of mental aberration? — Incessant talking with partial Delusions

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
No

23. What are the habits of the patient as regards personal cleanliness and decorum? —
inclined to bath

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. —

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Emma Margaret West
Sent to 102. Wells St. Farcham Hants —

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Tuffen West

whom I last saw at York —

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the Ninth day of November 1870 (a)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Tuffen West — Tuffen West

Signed, *Name,* Emma Margaret West, Furnell House.

Occupation (if any) ~~[illegible]~~

Place of Abode, Frensham, near Farnham, Surrey.

Degree of Relationship (if any), or other circumstances of connexion with the Patient ~~[illegible]~~ Wife / Wife of above

Dated this Ninth Day of November

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Tuffen West
Sex and Age	Male — About 48 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Studied for Medical profession
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	~~[illegible]~~ Frensham
Whether First Attack	Second
Age (if known) on First Attack	about 38
When and where previously under Care and Treatment	at York Friends' Retreat
Duration of existing Attack	about a fortnight
Supposed Cause	Over work
Whether subject to Epilepsy	not
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Edwin Tutte 102 West St Farnham Hants

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Emma Margaret West

Occupation (if any),

Place of Abode, Furnell House Frensham, nr Farnham, Surry

Degree of Relationship (if any), or other circumstance of connexion with the Patient Wife

Insert name & address

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Henry Cammack
being a (a) M.R.C.S. Surgeon & L.S.A.C. London
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the ninth day of November 1870
at (c) Mr Kirk's Hatfield Cottage, Heslington Road York,
in the County of York separately from any other Medical Practitioner,
personally examined Susan West Lithographic Engraver
of (d) Fenham Surrey — and that
the said Susan West
is a (e) of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) That he is very excitable in manner, his conversation very incoherent —

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, *Name,* Henry Cammack
Place of Abode, 58 Micklegate York
Dated this ninth day of November One Thousand Eight Hundred and Seventy —

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the ninth day of November
at (c) Mr Kirk's Hatfield Cottage, Heslington Rd York
in the county of York separately from any other Medical Practitioner,
personally examined Susan West Lithographic Engraver
of (d) Fenham Surrey and that
the said Susan West
is a (e) Person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He is very Excitable. Incoherent & incoherent

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, *Name,* William Procter
Place of Abode, 24 Petergate York
Dated this tenth day of Nov[illegible] One Thousand Eight Hundred and Seventy

1168

No 2 Stitching
I gave another
a warm Bath on the
Evening of her admission
and I found her free
from all Bruise Mark
or Sign of any Recent
Injury

Ann Clarkson

Nov 23rd 1870

No 1168.

Ann Priest.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? member sheh from Birth

2. Where was the place of birth of the patient? Clonky

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? three years Ackworth School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Farmers Daughter Industrious Temperate and regular habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. un Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? nothing

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

his apointment in having to leave a sele a farm and becoming a Preacher

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? no

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? nothing

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? None

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? first attack after low fever and death of mother 19 years ago

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack? 10 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Frost

Oakham Jails

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Priest

whom I last saw at Coniston (a) on the 11th day of 11th month 1870 (*)

a (b) Person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Ann Priest

Signed, *Name,* John Priest

Occupation (if any), Farmer

Place of Abode, Askham near Tadcaster York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Twenty First Day of November

One Thousand Eight Hundred and Seventy.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Ann Priest
Sex and Age	Female 50 years Old
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Domestic Servant
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Newsham
Whether First Attack	Second
Age (if known) on First Attack	31 years
When and where previously under Care and Treatment	At Wakefield under private care.
Duration of existing Attack	10 days
Supposed Cause	Loss of situation, loss of money.
Whether subject to Epilepsy	No. It is thought so.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	John Priest. Farmer. Askham Fields. York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Jno Priest

Occupation (if any), Farmer

Place of Abode, Askham Fields York

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Henry Horsfall

being a (a) member of the Royal College of Surgeons of England

and being in actual practice as a (b) Surgeon

hereby certify that I, on the eighteenth day of November Inst.

at (c) East Ardsley near Wakefield

in the County of York separately from any other Medical Practitioner,

personally examined Ann Priest

of (d) East ardsley Spinster and that

the said Ann Priest

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

Sits sighing in a melancholic mood, says she is a bad woman and a murderer & can have no forgiveness & that she wishes to die & asked me to destroy her

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Requested her brother in law to shoot her. has said she had killed a child but does not know where. The name of the Informant is James Ogry. Blacksmith East Ardsley

Signed, Name, Henry Horsfall

Place of Abode, Southgate, Wakefield

Dated this 21st day of November One Thousand Eight Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

X Name of the Informant

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North

being a (a) member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

hereby certify, that I on the twenty third day of November 1870

at (c) 31 Castlegate York

in the county of York separately from any other Medical Practitioner,

personally examined Ann Priest

of (d) East Ardsley nr Wakefield Spinster and that

the said Ann Priest

is a (e) Lunatic and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Just Examin'd Spinster a lady that she has left in bad & dead low spirits & just unkindness & that she has no hope for the future — her conversation is incoherent.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, S. W. North

Place of Abode, 31 Castlegate York

Dated this 23 day of November One Thousand Eight Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

1169

Dr Ketching

I gave Mary Thompson a vacum bath on the evening of her admission and I found her legs very much marked and bruised.

29th of Nov. A. Hodgson.

408

No. 1169.

Mary Thompson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Not a member, but brought up a Friend

2. Where was the place of birth of the patient?

Kendal

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not Known

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Not bright as a child & very difficult to teach anything

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Not much cultivated - a little at home

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

To help at home, passionate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

her mother at present in the Retreat

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Mental derangement

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

So far as we know more or less from childhood

15. What has been the duration of the present attack?

about two months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

monthly - lasting 4 or 7 days - passionate -

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

as far Complete as to allow her to do a little work

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

depression of Spirits & recently complains & not Living Sleep well

19. What were the first decided symptoms of mental aberration?

do not Know

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

extreme fullness

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly & orderly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

fair bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

never in any public asylum or hospital

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Frequently under the Medical Care of J. T. Brummell Esq Surgeon

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing no lucid Interval since the commencement of this attack

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Harrison
Stramongate
Kendal
As Trustee to her late Father's estate

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Thompson

whom I last saw at Kendal

on the 28th day of 11mo 1870 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Mary Thompson

Signed, *Name,* James Harrison

Occupation (if any), Tea Dealer & Grocer

Place of Abode, 12 Kent Terrace Kendal

Degree of Relationship (if any), or other circumstances of connexion with the Patient } no relation / Trustee thro late Father

Dated this 28th Day of 11mo 1870

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Mary Thompson
Sex and Age	Female in her 30th year
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	when fit employed at home, has an income of £4. for life
Religious persuasion, as far as known	Friend
Previous Place of Abode	always lived at Kendal
Whether First Attack	not known
Age (if known) on First Attack	do do
When and where previously under Care and Treatment	Not previously under care
Duration of existing Attack	about two months
Supposed Cause	I do not know
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	been examined by two Medical men
Name and Address of Relative to whom Notice of Death to be sent	Christopher Thompson, Stramongate, Kendal

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Harrison

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient } _____

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned James Hasdale Bramwell being a (a) M.R.C.S. Eng. & L.S.A. and being in actual practice as a (b) Surgeon hereby certify that I, on the 28th day of November 1870 at (c) her brother's house in Shamongate, Kendal in the County of Westmorland separately from any other Medical Practitioner, personally examined Mary Thompson of (d) Kendal and has no occupation and that the said Mary Thompson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f): — During the last 10 years I have frequently attended Mary Thompson when suffering from Paroxysms of Dangerous Mania alternating with Melancholy and Gloomy depression and obstinacy, the latter have predominated of late, no effort can obtain a reply to any question I am of opinion her mental incapacity is gradually approaching to dementia. An utter incapability of comprehending the meaning of any question put to her

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mary Leighton — for many years housekeeper to her brother (Mary Thompsons late father) says I have often been quite bodily fear of Mary Thompson when suffering from fits of passion and had to watch her when in a low and despondent state

Signed, Name, James Hasdale Bramwell

Place of Abode, 71 Stricklandgate, Kendal

Dated this 28th day of November One Thousand Eight Hundred and Seventy

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

+ Mary Thompson Kendal 28th November 1870 Lunatic Asylum Certificate. James Hasdale Bramwell

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Thomas Gough being a (a) M.R.C.S. Eng. & L.S.A. and being in actual practice as a (b) Surgeon hereby certify, that I on the twenty eighth day of Nov. 1870 at (c) her brother's house in Shamongate, Kendal in the county of Westmorland separately from any other Medical Practitioner, personally examined Mary Thompson of (d) Kendal & no occupation and that the said Mary Thompson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

I found her sullen & melancholy, unwilling to enter into conversation, made evasive answers that she was constipated & wished to be away

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Ann Thompson sister in law of Mary Thompson informs me that Mary Thompson is frequently violent & will attempt to escape from the house & conducts herself indecently.

Signed, Name, Thomas Gough

Place of Abode, 43 Stricklandgate Kendal

Dated this 28th day of November One Thousand Eight Hundred and Seventy

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

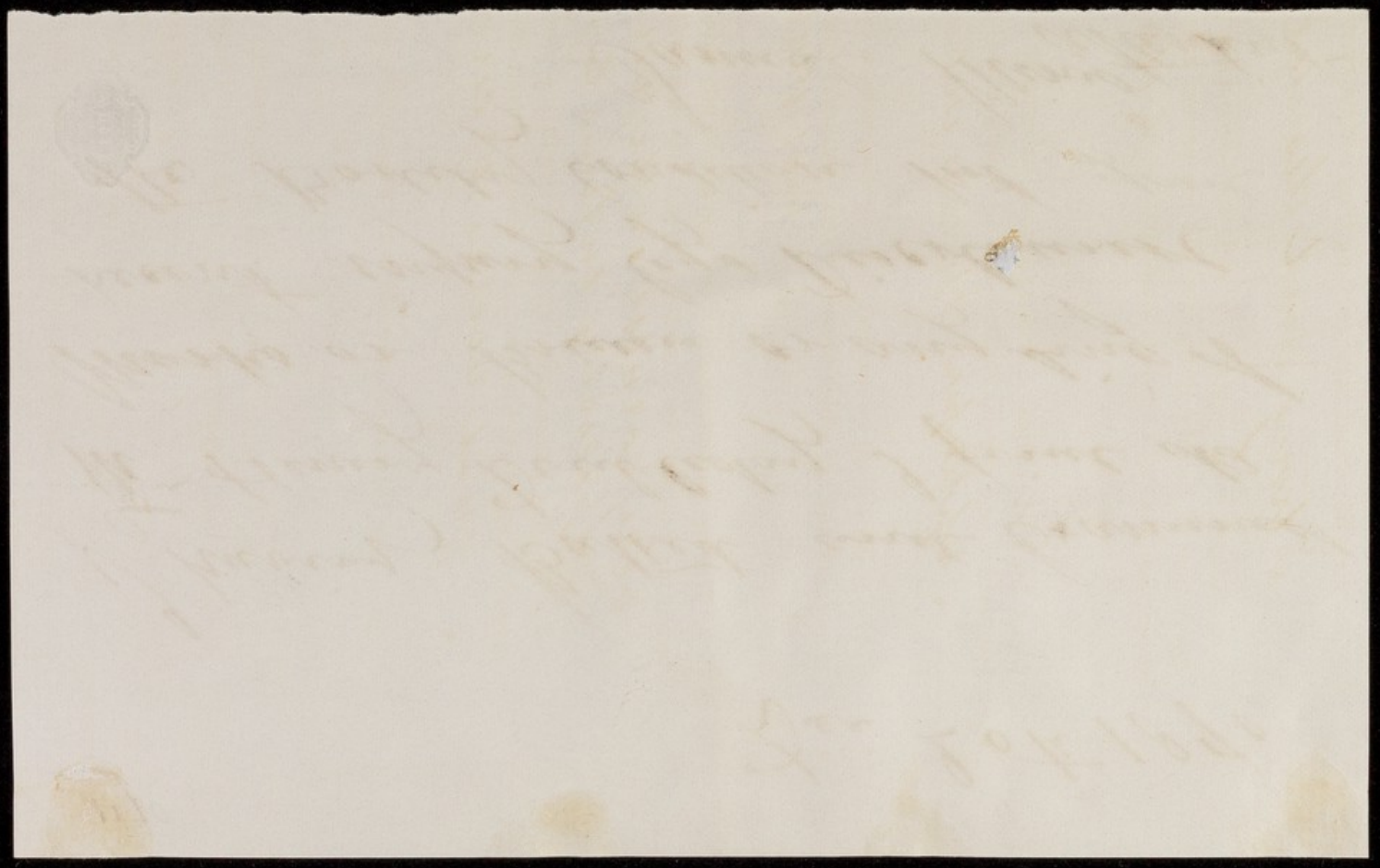
1170

Dec 20th 1870

I having Bathed and Examined Mr Henery Doubleday I find No Marks or Bruises or any sing of recent injury legs Discoloured the Bodily Condition not good

Samuel Mines
attendant

1147



No 1170.

Henry Doubleday

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? by birthright

2. Where was the place of birth of the patient? Epping Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

nothing very peculiar

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Strong and decided opinions and some degree of eccentricity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? A day scholar at Isaac Brims School Epping

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Shopkeeper He was industrious temperate and regular in conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

very earnest in the pursuit of Natural history especialy entimology

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

great reverse of circumstances ending in the loss of all his property

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

an irregular action of the heart

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Pecuniary difficulties

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 62 yrs

15. What has been the duration of the present attack? a fortnight.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

great depression of spirits

19. What were the first decided symptoms of mental aberration? the Taking large doses of Hydrarg. Bichlorid. Must produced vomiting and purging and his telling me the next morning he was crazy as had been in

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He is affected by various subjects. generally connected with the destruction of others or himself as fair poison.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? as on the occasion of taking the poison as above mentioned

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

He refuses food

23. What are the habits of the patient as regards personal cleanliness and decorum? & regardless of them but is attended properly to the wants of nature

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

a general debility from the violence of the attack & refusing food. He has recovered from the effect of the poison.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

He has had sedatives, but has latterly dept without them

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

to be increasing without lucid intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Henry Doubleday whom I last saw at Epping on the Seventeenth day of twelfth month 1870 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Henry Doubleday

Signed, *Name,* William Doubleday
Occupation (if any), Draper
Place of Abode, Coggeshale Essex
Degree of Relationship (if any), or other circumstances of connexion with the Patient First Cousin

Dated this Eighteenth Day of Twelfth month One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Henry Doubleday
Sex and Age	Male aged 62 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Grocer & Ironmonger Treasurer to Union
Religious persuasion, as far as known	Society of Friends & Agent to Sun Fire Office
Previous Place of Abode	Epping
Whether First Attack	Yes
Age (if known) on First Attack	62
When and where previously under Care and Treatment	Nowhere.
Duration of existing Attack	18 days
Supposed Cause	Pecuniary difficulties
Whether subject to Epilepsy	No
Whether Suicidal	Yes.
Whether Dangerous to others	Not apparently
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Doubleday Draper &c Coggeshall Essex

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) J. K. McNab
Occupation (if any), Surgeon
Place of Abode, Epping
Degree of Relationship (if any), or other circumstance of connexion with the Patient Visiting Medical Attendant

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Brickwood

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons & L S C

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

(c) Here insert the street and number of the house (if any), or other like particulars.

hereby certify that I, on the 18th day of December

at (c) Epping

in the County of Essex separately from any other Medical Practitioner,

personally examined Henry Doubleday

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Epping; Grocer and Ironmonger and that

the said Henry Doubleday

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

Profession or occupation

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) declares that he has destroy'd his Work world. has delusions about Jesus and write what letter he says is addressed with common Sentiments. William Doubleday

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) he is in fear of arrest by the Bishop of Man, of the implement common and that him no foundation in fact.

Signed, Name, John Brickwood

Place of Abode, Sawbridgeworth Herts

Dated this 18 day of Dec- One Thousand Eight Hundred and Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Trevor Fowler

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Licentiate of Kings & Queens Col. of Physicians Irel. and of Royal Col. of Surgeons Irel.

(b) Physician, surgeon, or apothecary, as the case maybe.

and being in actual practice as a (b) Genral Practitioner

(c) Here insert the street and number of the house (if any), or other like particulars.

hereby certify, that I on the 19th day of December

at (c) Epping

in the county of Essex separately from any other Medical Practitioner,

personally examined Henry Doubleday

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Epping. Grocer and Ironmonger and that

the said Henry Doubleday

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

Profession or occupation

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Says that all world know come to an end. - that there is sufficient sublimate on his tongue to poison all Epping. Calls his attendant Dr. Williams and says that he is endowed with supernatural power. also that fire in his room burns supernaturally.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) declares that his room will be deluged with water. and cannot be kept in but pours his time of this world coming to an end. - these facts were communicated to me by his attendant Doubleday

Signed, Name, Trevor Fowler.

Place of Abode, High Street. Epping

Dated this 19th day of December One Thousand Eight Hundred and Seventy -

No. 1171.
Benjn. Wood.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership – by birthright.

2. Where was the place of birth of the patient?

Bolton le moors – Lancashire.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

he was temporarily in the Retreat, it is supposed when about 21 years of age – owing to an attack of melancholy

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

He has acquired considerable knowledge & proficiency in Languages and has conducted Friends' Schools (public & private) for about 25 years.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

He was a man of very affectionate disposition – but lost his parents when very young – (further particulars not known)

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

He has always been very industrious, temperate, and of regular conduct – was first a chemist, afterwards a Colliery manager, then a Schoolmaster.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Was married at the age of 36 – has had Eight children
Ages – Eldest 39 – Youngest 21 years –

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Languages were his forte – he once edited a periodical.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

He was obliged suddenly to give up school & his next occupation did not suit his health – leaving him for 5 years past in dependent circumstances

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Never

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Immediately previous to his present infirmity – suffered from suffusion under the skin of his feet, and has taken a little wine daily to counteract the tendency to swelling & ulceration of legs and feet.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Nothing known – has an older brother living who is childish. –

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The gradual increase of imbecility to its present stage – succeeded an illness brought on after a sudden removal from teaching, to employment as clerk found unsuitable to him.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

imbecility has been increasing for the last 5 years.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

(see above)

19. What were the first decided symptoms of mental aberration?

(see above)

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

No special delusions – Averse to noise – very nervous and excitable, and latterly appears suspicious when touched.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Is more or less violent at times when interfered with – and is prone to destroy his clothes when being dressed or undressed, but has never made any dangerous attacks.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

none whatever

23. What are the habits of the patient as regards personal cleanliness and decorum?

He requires everything to be done for him, and appears to dislike being necessarily helped.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Is in good bodily health, but is ruptured –

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Referred to above.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Has not lately been under medical treatment.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Gradually increasing – without lucid intervals.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Hardshaw West Monthly Meeting –
Firth Woodhead (Treasurer)
Church St. Liverpool.

The above written from the statements of Anna Wood by Ann W. Davies
Shrewsbury Road, Oxton Birkenhead – an Overseer of the above Monthly Meeting.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Benjamin Wood

whom I last saw at Liverpool on the Twenty ninth day of Twelfth Month 1870. (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Benjamin Wood.

Signed, *Name,* Anna Wood

Occupation (if any), none

Place of Abode, 34 St. Paul's Road. Rock Ferry

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brikenhead Wife.

Dated this Twenty ninth Day of Twelfth month (December)

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Benjamin Wood
Sex and Age	Male - aged 77 years.
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	formerly Schoolmaster
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Belfast (Ireland) lately, 34 St. Paul's Road Rock Ferry
Whether First Attack	second
Age (if known) on First Attack	about 21 years.
When and where previously under Care and Treatment	The Retreat
Duration of existing Attack	about five years
Supposed Cause	sudden change of occupation, and old age. with poor circumstances
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	not especially so
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Wm Wood Jr. (nephew) 101 Gt George Street Liverpool

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Anna Wood

Occupation (if any), —

Place of Abode, (as above)

Degree of Relationship (if any), or other circumstance of connexion with the Patient —

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Benjamin Jowsor

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, *as the case may be.*

hereby certify that I, on the Twenty Second day of December instant

(c) *Here insert the street and number of the house (if any), or other like particulars*

at (c) 53 Shaw Stret Liverpool

in the County of Lancaster separately from any other Medical Practitioner,

personally examined Benjamin Wood late a Schoolmaster

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) 34 St Paul's Road - Rock Ferry Birkenhead and that

the said Benjamin Wood

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

He is quite vacant in his language - childish in Nature & quite unable to take care of himself - He is constantly talking in unintelligible language & rambling -

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

He is rambling childish & constantly trying to escape from his room destroying clothes & destructive habits breaking, tearing up things, which are given to him. From Samuel Wallis, Davis Street Shrewsbury, & Others Enclosed

Signed, Name, Benjamin Jowsor

Place of Abode, 53 Shaw Stret Liverpool

Dated this Twenty Second day of December One Thousand Eight Hundred and Seventy -

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, David Mark Williams

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Licentiate of King & Queens College of Physicians and Member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, *as the case may be.*

hereby certify, that I on the Twenty Second day of December instant

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) 55 Shaw St Liverpool

in the county of Lancashire separately from any other Medical Practitioner,

personally examined Benjamin Wood late a School Master

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) 34 St Paul's Road Rock Ferry Birkenhead Cheshire and that

the said Benjamin Wood

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Quite Childish and incoherent - unable to give an answer to the simplest question could not Remember her own Name - nor when he Called her or asked her to Nodded - or Shook her head or answered the Words -

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) From His Wife - Not to be left as he becomes quite childish and unable to take care of himself also unable to give a ~~correct~~ Correct Answer to any question David Mark Williams

Signed, Name, D Mark Williams

Place of Abode, 55 Shaw St, Liverpool

Dated this 22 day of December One Thousand Eight Hundred and Seventy -

No. 1172 John Mills.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Birthright

2. Where was the place of birth of the patient?

Lancaster

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Gentle & Mild

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Grocer

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

3 ~~4~~ children - 32 years - 3 yrs youngest

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Cant tele

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Through heavy losses -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

from Rupture

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

None -

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Anxiety & Illness

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

416

14. At what age was the patient first attacked with symptoms of insanity?

42 Years

15. What has been the duration of the present attack?

fortnight

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

It is

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

None

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Ill

19. What were the first decided symptoms of mental aberration?

Strange delusions

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Honesty —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Attempts but not attempt Life

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No — —

23. What are the habits of the patient as regards personal cleanliness and decorum?

Clean

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Gastric Fever — just recovered

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

None

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Iron —

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Francis H. Mills 3 Mill St Macclesfield

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Mills whom I last saw at his home, 3 Bull St Macclesfield on the 27th day of January - 1871 (a) a (b) person of unsound mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a statement respecting the said John Mills

Signed, *Name,* John Pearson

Occupation (if any), Shipowner & Landowner

Place of Abode, Cheadle

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Dated this 30th Day of January - 1871

One Thousand Eight Hundred and Seventy one

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	John Mills
Sex and Age	Male
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Grocer - Tea Member Society of Friends
Religious persuasion, as far as known	Ch. - York Rite
Previous Place of Abode	Yes
Whether First Attack	42 years
Age (if known) on First Attack	Not here
When and where previously under Care and Treatment	Fortnight
Duration of existing Attack	From Losses
Supposed Cause	No
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	None
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	Frances Anne Mills — his wife Mill Street Macclesfield
Name and Address of Relative to whom Notice of Death to be sent	

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Edward Hoof

Occupation (if any), Thrower

Place of Abode, Rainow nr Macclesfield

Degree of Relationship (if any), or other circumstance of connexion with the Patient Friend

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Joseph D: Sainter

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) L: R: C: P: S: & L: M. & L: A. C. London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon and Apothecary

hereby certify that I, on the twenty seventh day of January 1871

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) King Edward St Macclesfield

in the County of Chester separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined John Mills, Grocer

of (d) No 3 Mill St, Macclesfield and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said John Mills

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Being his medical attendant, on one occasion he called me aside and whispered that he was Jesus Christ and said he was going to Paris immediately to stop the war, on a divine mission. That the place was on fire and he smelled sulphur continually. Since then I have not observed a single lucid interval either in his conduct or conversation

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Joseph D: Sainter

Place of Abode, Macclesfield

Dated this 27th day of January One Thousand Eight Hundred and Seventy one

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Mottershead

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) member of the Royal College of Surgeons of England and a Licentiate of Apothecaries Hall. London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon, Apothecary

hereby certify, that I on the twenty eighth day of January 1871

(c) Here insert the street and number of the house (if any), or other like particulars.

at 3 Mill Street Macclesfield

in the county of Chester separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined John Mills. Grocer

of (d) Macclesfield, no 3 Mill Street and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said John Mills

is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) On asking him what day it was, he replied the beginning, I am where I was in the beginning – It is all blackness & darkness – On asking him if he knew me, he replied Dr Mottershead, the wickedest & perfidest amongst us. On asking him when he saw Mr Sainter, he replied a week since – Mr Sainter had visited him twice today

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His Wife states that he has broken pots glasses & anything he could lay hands on

Signed, Name, John Mottershead

Place of Abode, Macclesfield –

Dated this 28th day of January One Thousand Eight Hundred and Seventy one.

15/- per week.

No 1173.

Sam[l] Reynolds.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

By birthright

2. Where was the place of birth of the patient? Whitechapel, London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing remarkable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at Friends' School, Ackworth

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Draper: Industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 23 years of age = Eleven Children: Eldest 44
Youngest 25 =

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

A severe fall on the head is the only known probable Cause, W[h] occurred about twelve years ago

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About 57 years

15. What has been the duration of the present attack?

About twelve years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

Indecision of Conduct, & Threatee movements

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Thinks his property is lost: and he is Extremely Violent in his conduct & behaviour towards others

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Violent, destructive, and frequently attacks others

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Frequently refuses food: Inserts his head against the wall, throws himself down &c

23. What are the habits of the patient as regards personal cleanliness and decorum?

Poor

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Fair bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

No specific Medical means: The ordinary Moral ones

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing: Attacks of Excitement come on regularly every other day

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Marica Reynolds
2 Roslyn Villas
London Street
Folkestone

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Samuel Reynolds whom I last saw at 2 Roslyn Villas, London Street, Folkestone on the Third day of February (a) 1871 a (b) Person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Samuel Reynolds

Signed, *Name,* Maria Reynolds.
Occupation (if any), Nurse
Place of Abode, 2 Roslyn Villas, London St, Folkestone
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Wife

Dated this 3rd Day of February
One Thousand Eight Hundred and Seventy One

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Samuel Reynolds
Sex and Age	Male: 69 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Draper
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	2 Roslyn Villas, London St. Folkestone
Whether First Attack	Yes
Age (if known) on First Attack	57
When and where previously under Care and Treatment	at home
Duration of existing Attack	Twelve years
Supposed Cause	Fall on head
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	Yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Maria Reynolds address as above

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Maria Reynolds
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Silvester Easter of Surgeon in London being a (a) Member of the Royal College of Surgeons, London and a Licentiate of the Apothecaries' Company and being in actual practice as a (b) General medical Practitioner hereby certify that I, on the Fifth day of February 1871 at (c) 2 Roslyn Villas, London Street, Folkestone in the County of Kent separately from any other Medical Practitioner, personally examined Samuel Reynolds of (d) 2 Roslyn Villas, London Street, Folkestone and that the said Samuel Reynolds is a (e) Person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) The whole time of my visit at his residence this evening (40 minutes) was occupied by his attendant, who pacified him by getting her shoes & gaiters off & walk with others; he carried out instructions at times but he did not know what would become of him. She, the attendant says, he is violent & requires great care & watching. He does not attend to his calls of nature during the day, for many months past & what the paroxysms are, his manner

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) His wife and daughter informs me that during the paroxysm as the attendant says he destroys the furniture, shaves, breaks china, & sometimes attempts to destroy himself. He will take up a plate & shake it violently as if going to strike with it, but he will take up a plate & shake it violently as if going to strike with it, but he will take up a knife & fork as if going to eat his meal. This daughter told me that he had struck her & cut her head & this daughter told me that he threw the slipper from off his foot at her face when she was attempting to put it on.

Signed, Name, Silvester Easter M.R.C.S. & L.A.C.

Place of Abode, 19 London Street Folkestone

Dated this Fifth day of February One Thousand Eight Hundred and Seventy one

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Henry Lewis of Surgeon in London being a (a) Member of the Royal College of Surgeons and a Licentiate of the Apothecaries' Company and being in actual practice as a (b) General Medical Practitioner hereby certify, that I on the First day of February 1871 at (c) 2 Roslyn Villas, London Street, Folkestone in the county of Kent separately from any other Medical Practitioner, personally examined Samuel Reynolds of (d) 2 Roslyn Villas, London Street, Folkestone and that the said Samuel Reynolds is a (e) Person of Unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) At times he is very excitable in demeanour: every other day he becomes violent towards his friends, and is most excitable in manner. He frequently makes curious noises like the bark of a dog &c. He becomes quite maniacal, and impulsively strikes at all persons near him.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) He has struck with great violence his daughter & attendant at different times (Communicated by his Wife)

Signed, Name, Henry Lewis M.D.

Place of Abode, West Terrace Folkestone

Dated this First day of February One Thousand Eight Hundred and Seventy One

No 1174.
Lucy Bissell.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She is a member of the Society of Friends by Birthright

2. Where was the place of birth of the patient? At Charlbury Oxfordshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing whatever

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Her disposition & character were amiable & docile; they were not marked by any remarkable strength or vigour, nor by any eccentricity or decided peculiarity; nor was anything like precocity of intellect observable

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

They were not. Her literary instruction commenced in a day school in early life at home. She was at Ackworth School from her 12th to her 15th year, and received a plain English education

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

To Home and domestic employments, and occasional sewing in a small shop. Her habits were generally active & her conduct was always regular up to the time of her indisposition.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

None to either query

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Never.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

None

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

This is the first attack, and is supposed to to have originated in an unrequited attachment

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

26

15. What has been the duration of the present attack?

About eight months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

See reply to Query 13

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Not

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Considerable elevation of spirits, and a decided change in the temper, opinions and conduct - Neither the health or sleep was materially affected

19. What were the first decided symptoms of mental aberration?

Restlessness, and a disposition to weep or laugh, without any apparent cause

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

In an entire want of interest in passing events, and disinclination for active exertion - No remarkable delusion affects the patient

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

None

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

None

23. What are the habits of the patient as regards personal cleanliness and decorum?

Generally good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Fair bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

None

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Change of air for a short time only, without any good effect

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Rather increasing than otherwise; there are but slight variations in the case

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Charles Bissell

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Lucy Bissell

whom I last saw at Charlbury

on the Twenty fourth day of Second Month 1871 (a)

a (b) a person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Lucy Bissell

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, *Name,* Charles Bissell

Occupation (if any), Shopkeeper

Place of Abode, Charlbury Oxfordshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Second Day of Third Month

One Thousand Eight Hundred and Seventy one

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Lucy Bissell
Sex and Age	Female - Age 26 last birthday
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Spinster
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Charlbury
Whether First Attack	First
Age (if known) on First Attack	26
When and where previously under Care and Treatment	Nil
Duration of existing Attack	8 Months
Supposed Cause	Unrequited attachment
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Charlbury. Charles Bissell Shopkeeper

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John M. Albright

Occupation (if any),

Place of Abode, Hazeldean Charlbury - Oxfordshire

Degree of Relationship (if any), or other circumstance of connexion with the Patient No connexion with Patient

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the fourth day of March 1871 at (c) The house of Mrs Kirk Holgate Road York in the County of York separately from any other Medical Practitioner, personally examined Lucy Bissell of (d) Charlbury Oxfordshire single woman and that the said Lucy Bissell is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She is suicidal - has no knowledge of or interest in passing events - her memory is failed she sometimes will frequently a conversation & seems lost when passing from one subject to another.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Ann Swithenbank informs me that she is very quiet in her own & family & weak mind & forgetful of recent even the most recent events

Signed, *Name,* S W North

Place of Abode, 31 Castlegate York

Dated this fourth day of March One Thousand Eight Hundred and Seventy one

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter being a (a) Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify, that I on the sixth day of March 1871 at (c) the house of Mrs Kirk, Holgate Rd York in the county of York separately from any other Medical Practitioner, personally examined Lucy Bissell of (d) Charlbury Oxfordshire - single woman and that the said Lucy Bissell is a (e) person of unsound mind a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She is much like - Suicidal - cannot yet reply to any plain question - her difficulty is remembering common facts & events - Quite unaccountable into fits of laughter

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Ann Swithenbank informs me, that she is variable in her temper without any apparent reason & has occasional fits of excitement

Signed, *Name,* William Procter

Place of Abode, 14 Petergate - York

Dated this sixth day of March One Thousand Eight Hundred and Seventy one

1174

O2 Itching

I gave Lucey Bissell
a Warm Bath on the
evening of her
admission and I found
her free from all
Bruise mark or sign
of any recent injury.

Ann Clarkson

March 10th 1871.

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№ 1175.
Robert Horsnaill.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Birthright-member

2. Where was the place of birth of the patient? Stroud, Kent,

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing unusual

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? In early life at a day school – Afterwards for about a year at a preparatory Boarding school. Kept by a Friend – Subsequently at Croydon School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Apprenticed to a Friend – a grocer. His conduct was satisfactory on the points mentioned; particularly as regards industry & steadiness.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No — Had a taste for music – but did not cultivate it.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No material change.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Was reported to have had a very slight fit whilst at preparatory school but no further attack till the present one.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? NO

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? A great Aunt became insane. An Uncle lost his memory. Two cousins are now under care.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Disappointment in a love affair. The extremely hot climate of Queensland, & damp situation of his farm. Living much alone. Religious depression.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About thirty eight years.

15. What has been the duration of the present attack?

From abt 9th mo 1869 to present time.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

about 7th mo 1869 - supposed to have suffered from low fever for about two weeks.

19. What were the first decided symptoms of mental aberration?

loss of memory

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Talking in an incoherent manner chiefly mentioning his relations & also religious subjects.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Has been violent at times destroyed his clothes on one occasion. His attendant reports him quieter for the last 2 months.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Has good appetite. ——— Has a tendency to injure himself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Has no control over himself.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In good health - except subject to epileptic fits.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Was in public Asylum in Australia for several months since commencement of his attack. Result not known.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Unknown

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The attendant reports that the fits have been less frequent & less violent of late. The prostration of intellect is more entire than when he left Australia.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry Hancock.
Bayford Hill
near Broxbourne Essex

William Catchpool.
65. St John's Park Upp Holloway
London N.

These replies are hastily given as regards the patient having been in Australia only 2 days.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Robert Horsnaill whom I last saw at 355 Goswell Road - London on the Twenty eighth day of Third month 1871 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Robert Horsnaill

Signed, *Name,* Henry Horsnaill
Occupation (if any), Miller
Place of Abode, Bullford Mill near Braintree. Essex.
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this Twenty eighth Day of Third month
One Thousand Eight Hundred and Seventy one

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Robert Horsnaill
Sex and Age	male - Thirty nine years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Farmer - brought up as a grocer.
Religious persuasion, as far as known	Member of Society of Friends.
Previous Place of Abode	Queensland - Australia
Whether First Attack	First attack
Age (if known) on First Attack	Thirty eight
When and where previously under Care and Treatment	Woogaroo Asylum. Queensland near Brisbane.
Duration of existing Attack	Abt 18 months
Supposed Cause	Heat of climate. Disappointment in love affair & depression
Whether subject to Epilepsy	Yes.
Whether Suicidal	Not supposed to be
Whether Dangerous to others	Has been violent at times & has threatened his Keeper
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Henry Horsnaill - Bullford Mill near Braintree Essex

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Horsnaill
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Henry Thos Berry being a (a) a Member of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the Twenty Eighth day of March 1871 at (c) 355 Goswell Road E.C in the County of Middx separately from any other Medical Practitioner, personally examined Mr Robert Horsnaill of (d) 355 Goswell Road E.C. late Farmer in Queensland and that the said Mr Robert Horsnaill is a (e) person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Very incoherent - points up the Chimney - says look, look - there they come - they come - and becomes excited - I could not ascertain what was intended or seen - He said there they go - Was not put by Counsel - examination - a case of sense but his replies

2. Other facts (if any) indicating Insanity communicated to me by others (g) Laurence Conway His attendant states that he cannot be left - He will injure himself - He has had often to foster his hand, at night

Signed, *Name,* Henry Thos Berry

Place of Abode, 29 Amwell Street Clements Square E.C

Dated this 28th day of March One Thousand Eight Hundred and Seventy One

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) *Physician, surgeon, or apothecary, as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) *Lunatic, or an idiot, or a person of unsound mind.*
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Joseph Meredith Ramsbotham being a (a) Doctor of Medicine of the University of St Andrews a member of the Royal College of Surgeons England & Licentiate of the Apothecaries Company and being in actual practice as a (b) General Practitioner hereby certify, that I on the twenty eighth day of March 1871 at (c) 355 Goswell Road E.C. in the county of Middx separately from any other Medical Practitioner, personally examined Mr Robt Horsnaill of (d) 355 Goswell Road E.C. and that the said Mr Robt Horsnaill. is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
His rambling and incoherent manner of speaking - his inability to give a direct answer - his suddenly starting up and pointing with his finger towards the window and exclaiming "See see there they are and it is all true"

2. Other facts (if any) indicating Insanity communicated to me by others (g) Laurence Conway In corroboration of above from the party who has had charge of him during his voyage home from Australia and who also knew him when in an Asylum in that Country.

Name of attendant must be given

Signed, *Name,* Jos Ramsbotham

Place of Abode, 15 Amwell Street E.C.

Dated this 28th day of March One Thousand Eight Hundred and Seventy One.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) *Physician, surgeon, or apothecary, as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) *Lunatic, or an idiot, or a person of unsound mind.*
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

No 1176.

E. M. Stanley.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Six months ago came on — hysteria — at Bedcar — began laughing & crying — a few weeks after been to say she was infused — commitment against [illegible] crying —

15. What has been the duration of the present attack?

always a bad sleeper —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

not refused food.

23. What are the habits of the patient as regards personal cleanliness and decorum?

good —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

good health —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Saml H. Stanley
Chemist
Kirkgate
Bradford —

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Eliza Matilda Stanley whom I last saw at York on the Seventeenth day of April 1871 (a) a (b) person of unsound as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Eliza Matilda Stanley

Signed, *Name,* Sam[l] H. Stanley
Occupation (if any), Chemist
Place of Abode, Bradford
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this 17th Day of April
One Thousand Eight Hundred and Seventy one

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Eliza Matilda Stanley
Sex and Age	Female aged Thirty
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Wesleyan Methodist
Previous Place of Abode	Shipley
Whether First Attack	First
Age (if known) on First Attack	Twenty nine
When and where previously under Care and Treatment	Beckham Asylum 5 Months
Duration of existing Attack	Six Months
Supposed Cause	not known
Whether subject to Epilepsy	No
Whether Suicidal	Probably
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sam[l] H Stanley, Shipley near Leeds

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Sam[l] H. Stanley
Occupation (if any), Chemist
Place of Abode, Bradford
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Proctor being a (a) Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the Seventeenth day of April at (c) The House of James Mennell Bootham York in the County of York separately from any other Medical Practitioner, personally examined Eliza Matilda Stanley of (d) Lendal Bank - Shipley - York and that the said Eliza Matilda Stanley is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She says she has no Lunacy - Delusions - Hallucinations - She says that she has committed ~~Suicide~~ Incest & Adultery I am no consideration

2. ~~Other facts (if any)~~ indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* W. Proctor

Place of Abode, 24 Petergate - York

Dated this 17th day of April One Thousand Eight Hundred and Seventy two

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William York being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the Seventeenth day of April 1872 at (c) The House of James Mennell Bootham York in the county of York separately from any other Medical Practitioner, personally examined Eliza Matilda Stanley of (d) Lendal Bank Shipley Yorkshire Single woman and that the said Eliza Matilda Stanley is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Great Depression of spirits - She says she has lost all hope both in this world & the next

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* S. W. York

Place of Abode, 31 Lendal Bank York

Dated this 17th day of April One Thousand Eight Hundred and Seventy two

No 1174
George Littlewood

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

A suspicion of having been defrauded in his business.
A continued depression on the same account.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 33 years

15. What has been the duration of the present attack? 24 hours

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? One before, about 3 weeks, great excitement at the first attack, not suicidal.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? None

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
at times unusually elevated, & at others depressed. He suffered from loss of sleep & appetite for about a month.

19. What were the first decided symptoms of mental aberration? An unnatural desire for speculation, & the neglect of his usual business.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
In a strong desire for self-destruction & the destruction of the affected chiefly by the idea that he has been ruined. That he is financially ruined.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? His desire for such is great, but he has had no opportunity for effecting them.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
He has refused food, he tried to destroy himself

23. What are the habits of the patient as regards personal cleanliness and decorum?
Perfectly correct, so far as I know

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
He is in good bodily health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
He has been in the Retreat for 3 months from October 1870 to January 1871, once, with partial restoration.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
A medical man has seen him, but prescribed, but without effect.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
The disorder is increasing, there are lucid intervals, which occur at uncertain times

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
James Fry Hance

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive George Joseph Littlewood

whom I last saw at Handsworth Woodhouse

on the twenty eighth day of May 1871 (a)

a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said George Joseph Littlewood.

Signed, *Name,* James Dix France

Occupation (if any), Cashier

Place of Abode, Woodhouse nr. Sheffield

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother in Law

Dated this twenty eighth Day of May 1871

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	George Joseph Littlewood
Sex and Age	Male, 33 years
Married, Single, or Widowed	Widower
Condition of Life, and previous Occupation (if any)	Grocer
Religious persuasion, as far as known	Society of Friends non-member
Previous Place of Abode	Retford
Whether First Attack	Second attack
Age (if known) on First Attack	33 years
When and where previously under Care and Treatment	Friends' Retreat, York
Duration of existing Attack	24 hours
Supposed Cause	Business derangements not that I think of
Whether subject to Epilepsy	Suicidal
Whether Suicidal	Slightly so
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	none
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	James Dix France
Name and Address of Relative to whom Notice of Death to be sent	

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Dix France

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Andrew Crichton Chalmers being a (a) Doctor of Medicine of the University of Edinburgh and a Licentiate of of the Royal College of Surgeons, Edinburgh and being in actual practice as a (b) Physician hereby certify that I, on the twenty eighth day of May at (c) Handsworth, Woodhouse in the County of York separately from any other Medical Practitioner, personally examined George Joseph Littlewood of (d) Retford — Grocer and that the said George Joseph Littlewood is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He is my violent, unmanageable & threatening in his manner & uses oaths & other filthy language in a manner unbecoming for — He can only be prevented by great force from leaving his present home.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Corroboration of the above by James Dix France who also says he has shewn suicidal tendencies.

Signed, *Name,* Andr. C. Chalmers M.D.
Place of Abode, Upper Gell Street, Sheffield.

Dated this twenty eighth day of May One Thousand Eight Hundred and Seventy one

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William James Le Gall being a (a) Surgeon & Apothecary Member of Royal College of M.R.C.S. & S.S. England, Licentiate of Apothecaries and being in actual practice as a (b) Genl Company Lincoln hereby certify, that I on the 28th day of 5th month at (c) Handsworth Woodhouse in the county of York separately from any other Medical Practitioner, personally examined Geo Josh Littlewood of (d) Retford Grocer and that the said Geo Josh Littlewood is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) that upon seeing the individual he immediately desired me to kiss him and upon another a female coming in he made same request and was somewhat violent in my presence

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) that he has violent desire to go, but without any evident reasonable object from Pete France

Signed, *Name,* Wm Jas Le Gall
Place of Abode, Handsworth Woodhouse

Dated this 28th day of 5th mo One Thousand Eight Hundred and Seventy one

No 1178
James C. Cass.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? no

2. Where was the place of birth of the patient? Stokesley

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? none

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Ordinary

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Mechanics night School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Weaver always temperate & Industrious to excess

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. married at 32 eldest son 11 Youngest about 13

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? no

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? no

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? no

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? no

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? no

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Anxiety about business matters

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 51

15. What has been the duration of the present attack? 2 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

—

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

depressed in Spirits for several months in other respects in good health

19. What were the first decided symptoms of mental aberration?

Excitement

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Imagines himself to be very rich and is inclined to imprudent Speculation

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No but has threatened one or two persons

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Clean

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Often seems depressed & feeble

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mrs Martha Cass
Mill Field Villa
Barnsley

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Castle Cass

whom I last saw at Barnsley

on the first day of June 1871 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said James Castle Cass

Signed, *Name,* p Martha Cass

Occupation (if any),

Place of Abode, Well Field Villa

Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this first Day of June

One Thousand Eight Hundred and Seventy one

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	James Castle Cass
Sex and Age	Male
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	In good circumstances, formerly a weaver
Religious persuasion, as far as known	Member of no church, often attends the Congregational
Previous Place of Abode	Has lived about 3 years at Stokesley, blind 3 years
Whether First Attack	First attack
Age (if known) on First Attack	Fifty one
When and where previously under Care and Treatment	Under no previous treatment
Duration of existing Attack	2 Months
Supposed Cause	Anxiety and worry in business, followed by overjoy at affairs going on mostly satisfactorily
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	If annoyed, he may strike other people at times has been worse in this respect for the last 2 or 3 days.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mrs Cass, Wellfield Villa Barnsley

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Martha Cass

Occupation (if any),

Place of Abode, Wellfield Villa Barnsley

Degree of Relationship (if any), or other circumstance of connexion with the Patient Wife

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

Full name omitted

I, the undersigned Michael Thomas Sadler
being a (a) Doctor of Medicine of the University of London &c
and being in actual practice as a (b) Physician and Surgeon
hereby certify that I, on the twentyfirst day of May 1871
at (c) 10 Church Street Barnsley
in the County of York separately from any other Medical Practitioner,
personally examined James Castle Cass
of (d) Barnsley Outfitter and that
the said James Castle Cass
is a (e) a person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) a general unnatural excitability of manner with delusions such as that he is possessed of superhuman strength and that even a cannon ball could not pass through his chest

(g) *Here state the information, and from whom.*

Name of informant must be given

2. Other facts (if any) indicating Insanity communicated to me by others (g) viz by James Cass He has struck at people he has met in the streets and is making imprudent purchases and talks wildly about his great wealth

Signed, *Name,* Michael Thos Sadler
Place of Abode, Barnsley

Dated this thirtyfirst day of May One Thousand Eight Hundred and Seventy one

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

Farsh. address

Full name and occupation omitted

I, the undersigned,
being a (a) Member of the Royal College of Surgeons and a Licentiate of the Apothecaries Company London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the second day of June 1871
at (c) Barnsley No 12 Market Hill
in the county of York separately from any other Medical Practitioner,
personally examined James Castle Cass outfitter
of (d) Barnsley and that
the said James Castle Cass
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

Name of informant required

1. Facts indicating Insanity observed by myself (f) That he is very Excitable and demonstrative waving his hands & flourishing his stick over his head. Says he is the strongest man in creation. Can stop a Cannon ball Easily with one hand, Can knock a regiment of soldiers down at once with his fist that he has hit numerous friends over the shoulders and that they are all walking about with poultices on &c

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) He has struck several officials at the Darton Railway station and is going to take out summonses against them and I was informed by Mr. Edward Horne of Market Hill Barnsley

Signed, *Name,* Edward Jeffery M.R.C.S. & S.A.
Place of Abode, Barnsley

Dated this second day of June One Thousand Eight Hundred and Seventy one

No 1179.
Hannah Kleiser

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Andrew Kleiser
39 Stonegate
York.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Hannah Kleiser

whom I last saw at my House

on the twenty fourth day of July. (a)

a (b) person of unsound mind. as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Hannah Kleiser

Signed, *Name,* Andrew Kleiser

Occupation (if any), Clerk to Wm. Mekie

Place of Abode, 39 Stonegate. York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband.

Dated this twenty fourth Day of July.

One Thousand Eight Hundred and Seventy one.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Hannah Kleiser.
Sex and Age	Female; 50;
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	House Keeper &c
Religious persuasion, as far as known	Catholic.
Previous Place of Abode	39 Stonegate. York.
Whether First Attack	First Attack.
Age (if known) on First Attack	Fifty.
When and where previously under Care and Treatment	At Home
Duration of existing Attack	one Week.
Supposed Cause	Trouble
Whether subject to Epilepsy	No
Whether Suicidal	No.
Whether Dangerous to others	Yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Andrew Kleiser, 39 Stonegate. York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Andrew Kleiser

Occupation (if any), Clerk to Wm. Mekie

Place of Abode, 39 Stonegate - York.

Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband.

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned George Thann
being a (a) Physician & Fellow of the Royal College of Physicians
and being in actual practice as a (b) Physician
hereby certify that I, on the 24th day of July 1871
at (c) 39 Stonegate York
in the County of the City of York separately from any other Medical Practitioner,
personally examined Hannah Kleiser
of (d) 39 Stonegate wife of Andrew Kleiser Clock maker and that
the said Hannah Kleiser
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) That per conversation was altogether wild & incoherent

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
That she was violent & unmanageable & attempted to get out of the window, as stated by her Sister & her attendant nurse —

Mary Kleiser

Signed, *Name,* G. Thann M.D.
Place of Abode, Petergate York
Dated this 24th day of July One Thousand Eight
Hundred and Seventy one —

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 24 day of July
at (c) 39 Stonegate - York
in the county of York separately from any other Medical Practitioner,
personally examined Hannah Kleiser wife of Andrew Kleiser
of (d) 39 Stonegate and that
the said Hannah Kleiser Clockmaker
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is totally irrational & incoherent in conversation & is at times violent & excited

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Procter
Place of Abode, 24 Petergate - York
Dated this 24 day of July One Thousand Eight
Hundred and Seventy one

No 1180

Mackevoa W. Phillips

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

The patients mother was a member until her marriage —

2. Where was the place of birth of the patient?

Stratton Dean - Somersetshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not until a fall which apparently injured the brain - about the age of four years

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Much pains taken, home and schools tried, - especially home training

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

He was brought up to no occupation, appearing unfit - habits inclined to indolence

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No -

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No - particularly healthy and well formed.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

accounts to be sent to
S. Wyllys - Slapton - Dartmouth

References - C Haywood, Dartmouth
E. H. Hunt, Royal Fort, Bristol -
Members of the Society -

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mackeson West Wyllys

whom I last saw at no 3. Belle Vue Road, York,

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the twenty sixth day of Eighth Month, (a)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Mackeson West Wyllys

Signed, *Name,* Christopher Robinson

Occupation (if any), Grocer

Place of Abode, York.

Degree of Relationship (if any), or other circumstances of connexion with the Patient } An Overseer in York Meeting of Religious Society of Friends.

Dated this 26th Day of 8th Month

One Thousand Eight Hundred and Seventy one.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length		Mackeson West Wyllys
Sex and Age		Male - 21
Married, Single, or Widowed		Single
Condition of Life, and previous Occupation (if any)		no occupation
Religious persuasion, as far as known	√	Church of England
Previous Place of Abode	√	Stanton Drew, Somersetshire.
Whether First Attack	}	Affected in a measure since the age of four years but more decided since the age of fifteen.
Age (if known) on First Attack	}	
When and where previously under Care and Treatment		Essex Hall, Colchester & Larbert, Stirlingshire.
Duration of existing Attack	√	Since the age of fifteen.
Supposed Cause	√	Injury to the brain from a fall.
Whether subject to Epilepsy	√	No.
Whether Suicidal	√	No.
Whether Dangerous to others	√	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition		Pronounced of unsound mind previous to going to Larbert in the beginning of 1868.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners		
Name and Address of Relative to whom Notice of Death to be sent	√	Mrs S. Wyllys. Start. Slapton. South Devon. Sarah

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) ~~Mackeson West Wyllys~~ Sarah

Occupation (if any),

Place of Abode, Slapton Dartmouth

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Mother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned William Procter
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the twenty sixth day of August 1871
at (c) No 3 Belle Vue St - York
in the County of York separately from any other Medical Practitioner,
personally examined Mackson West Wyllis - single - no occupation
of (d) Stanton Drew - Somerset and that
the said Mackson Drew Wyllis
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) - He is weak & feeble in his intellect - can carry on no conversation & cannot answer correctly the simplest question

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* W. Procter
Place of Abode, 24 Petergate - York
Dated this twenty sixth day of Augt One Thousand Eight Hundred and Seventy one

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty sixth day of August 1871
at (c) 3 Belle Vue Street York
in the county of York separately from any other Medical Practitioner,
personally examined Mackson West Wyllis no occupation
of (d) Stanton Drew Somerset and that
the said Mackson West Wyllis
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
he is imbecile unable to sustain any regular conversation -

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. H. North
Place of Abode, 31 Castlegate York
Dated this 26 day of August One Thousand Eight Hundred and Seventy one

No. 1181

Florence D. Smith.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Over mental exertion

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 14 years of age

15. What has been the duration of the present attack? Nearly three months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?
5 attacks of various duration, from a few days to several months. Violent excitement

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Completely sane for a year and a half. ~~Doubtful.~~ This was the longest interval.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Sleeplessness, extreme irritability of temper, talkativeness with an ~~aggravated~~ idea of her own importance

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Destructive mess and ill will to her friends. Excitable on amatory subjects

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?
No tendencies to attack other persons

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
None whatever.

23. What are the habits of the patient as regards personal cleanliness and decorum?
During the fits, eccentricity of attire and want of cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
She is in usual health which is never very strong.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
In 1866 3 months in York Retreat, Cured.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Soothing, ~~medicines~~ have been given but have been only slightly successful

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing, but with lucid interval aggravated each month.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Bocking Monthly Meeting is responsible for the payments each quarter. The accounts to be sent to Barron Smith
Church St.
Bocking Essex

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

The name must be given in full

I, the undersigned, hereby request you to receive Florence Dorothy Smith whom I last saw at Bristol. on the 20th day of August 1871 (a) a (b) Person of unsound mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Florence Dorothy Smith

Signed, *Name,* Capella Eliza Sims

Occupation (if any),

Place of Abode, Bristol.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this 29th Day of August

One Thousand Eight Hundred and Seventy /

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Florence Dorothy Smith
Sex and Age	Female Age 19. years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Orphan child.
Religious persuasion, as far as known	Quaker.
Previous Place of Abode	Clew Magna, Nr Bristol.
Whether First Attack	Not the first.
Age (if known) on First Attack	14 years
When and where previously under Care and Treatment	At Friends' Retreat. in 1866.
Duration of existing Attack	Nearly 3 months.
Supposed Cause	Over mental exertion
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No Inquiry by Commission
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Barron Smith, his uncle, Barking, Essex

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Capella Eliza Sims

Occupation (if any),

Place of Abode, Bristol. (35 Clare Street)

Degree of Relationship (if any), or other circumstance of connexion with the Patient Sister to the Patient.

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned
being a (a) General Practitioner – MRCSE. & LSA –
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the Twenty seventh day of August 1871
at (c) Chew Stoke
in the County of Somerset separately from any other Medical Practitioner,
personally examined Florence Dorothy Smith
of (d) Bristol now resident at Chew Stoke & of no occupation – and that
the said Florence Dorothy Smith
is a (e) person of Unsound Mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
General destructiveness – Incoherence of Ideas.
Excitement of behaviour and incessantly talking of intentions and things having no meaning or sense.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
The wanton destruction of her Clothes & Bedding and anything she can gain possession of – Constant restlessness – and Incoherent talkativeness.

The Name of Chew Stoke Informant – By Henrietta Stokes

Signed, *Name,* Charles Howell Collins. MRCSE
Place of Abode, The Beeches Chew Magna &c

Dated this Twenty seventh day of August One Thousand Eight Hundred and Seventy one –

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Robert William Coe
being a (a) Fellow of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Twenty ninth day of August 1871
at (c) Gt. George St. Bristol
in the county of Bristol separately from any other Medical Practitioner,
personally examined Florence Dorothy Smith
of (d) 35 Old Market St. Bristol and that
the said Florence Dorothy Smith
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) /
Uncontrollable excitement – Incessant talking – incoherence of thought

(g) *Here state the information, and from whom.*

Name of informant should be given –

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Tendency to destroy things, uncontrollable impulses by Thomas Francis Ferris

Signed, *Name,* R. W. Coe
Place of Abode, Gt. George St. Bristol

Dated this Twenty ninth day of August One Thousand Eight Hundred and Seventy one

No 1182.
Thomas Saunders

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (~~or she~~) in any way connected with the Society of Friends? Formerly a Member

2. Where was the place of birth of the patient? Witham Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
I do not remember any peculiarity or precocity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Educated at Ackworth School

6. To what occupation was the patient brought up; and what were his (~~or her~~) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Ironmonger — Somewhat unsettled during ~~Fort~~ Early Manhood

7. If the patient be married, state at what age his (~~or her~~) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Married at about the 47th Year of no family

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Grandmother somewhat affected a Year prior to death

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Extreme nervousness produced by unsteady conduct & some excess in ~~the~~ the use of stimulants

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? about 60 years

15. What has been the duration of the present attack? 5 years or more

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
It has been continuous & increases

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? not known

19. What were the first decided symptoms of mental aberration? nervous dread of Poverty

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Constant belief that he has lost his Money & shall be murdered

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
No

23. What are the habits of the patient as regards personal cleanliness and decorum? Somewhat indifferent to personal cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? none

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
It increases in although fluctuating

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Joseph Sanders.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Thomas Sanders whom I last saw at No 2 Crawford Street Camberwell on the Seventh day of the Ninth Month 1871 (a) a (b) Person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Thomas Sanders

Signed, Name, Joseph Sanders.
Occupation (if any), Accountant
Place of Abode, 2 Warner Road Camberwell
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Brother

Dated this Ninth Day of Ninth Month
One Thousand Eight Hundred and Seventy one

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Thomas Sanders
Sex and Age	Male aged 65 Years
Married, Single, or Widowed	Widower
Condition of Life, and previous Occupation (if any)	Gentleman formerly Ironmonger
Religious persuasion, as far as known	Churchman
Previous Place of Abode	Eastbourne
Whether First Attack	First
Age (if known) on First Attack	About 60 Years
When and where previously under Care and Treatment	No where
Duration of existing Attack	About 5 Years
Supposed Cause	Chronic nervous dep.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Joseph Sanders 1 Alfred Cottages Warner Road Camberwell Surrey

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) Joseph Sanders
Occupation (if any), Accountant
Place of Abode, Camberwell
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned George Puckle
being a (a) Doctor of Medecine and Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Eighth day of September 1871
at (c) 2 Crawford Street - Camberwell
in the County of Surrey separately from any other Medical Practitioner,
personally examined Mr Thomas Sanders
of (d) No 2 Crawford Street - formerly an Ironmonger and that
the said Mr Thomas Sanders
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
Constantly believes that he is going to die almost immediately - that the persons in the house will murder him and that at other places where he has been a number of persons have plotted the same thing - and that he is quite ruined

2. Other facts (if any) indicating Insanity communicated to me by others (g)
that he was going to be murdered and buried in the cellar and requested his brother to procure for him a paper coffin communicated by his brother Joseph Sanders

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, George Puckle
Place of Abode, Denmark Hill Surrey
Dated this Eighth day of September One Thousand Eight Hundred and Seventy one

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Wm Bramley Taylor
being a (a) Member of the Royal College of Surgeons of England & of the Apothecaries Society
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Eighth day of September
at (c) 1 Alfred Cottages, Warner Road
in the county of Surrey separately from any other Medical Practitioner,
personally examined Thomas Saunders
of (d) 2 Crawford Street, Camberwell and that
the said Thomas Saunders
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He appears intensely melancholy & unhappy. Says he has sunk all his money in a bank & will never be able to get it again & consequently has ruined all his family & relations, which is a delusion. Says he will not live long & that he will fall down dead in the street next time he goes out.

2. Other facts (if any) indicating Insanity communicated to me by others (g) His nephew Arthur Saunders tells me he has been very miserable for the last 12 months, always fancying himself the greatest sinner living, reduced to ruin, & when he goes to bed fancies he will be murdered before morning. Sits all day thinking of his troubles or does nothing.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, William Bramley Taylor.
Place of Abode, Pine House, Camberwell Green.
Dated this Eighth day of September One Thousand Eight Hundred and Seventy One.

No. 1183.
William H. Thompson.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

He is in membership by birthright

2. Where was the place of birth of the patient?

43 Union Terrace, York

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

His youth was characterized by great want of perception & by slowness of comprehension, by excitability and impulsiveness — by inefficiency and helplessness, constantly requiring assistance in all his pursuits — In his early days he had an extraordinary memory for what he read

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

His affections certainly were much cultivated in very early life — and I think his understanding was also, but not under undue pressure. — After being taught at home by his Mother, he was 7 years at the Friends' School, York, and one year at Tod Smith's at Weston

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

He was bred successively at a Draper's, at two Grocers' and at a Bookseller's, but proved incompetent at each — He was subsequently placed at Bookbinding, but has attained very little skill — Whilst he seems as if he must always be employed, he has little power of application. He was a Teetotaler till recently, when getting under Soil in Rhodes, he has I believe been sometimes led to take liquor — I have not noticed any tendency to what is popularly known as "immorality"

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

We have always attributed his mental infirmities to severe illness when suffering under the sequela of Scarlatina, when about 10 yrs old —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

I know of no hereditary predisposition, nor have any near relatives been insane. —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

See Answer to No 11 — As he has increased in age his mental infirmity has increased also. —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

It has been of such gradual growth that I cannot say.

15. What has been the duration of the present attack?

With fluctuations from childhood

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

See answer to No 15

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Elevations and depressions (the latter slight only) alternate.
but his sleep and health do not perceptibly affected.

19. What were the first decided symptoms of mental aberration?

Impetuousness

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

By Impetuousness and lack of self control — by great excitement at times — by an overweening idea of his own capabilities — by confusion of memory —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

He has frequently struck others when excited. On one occasion he threw a heavy piece of Iron at the head of a fellow workman, who narrowly escaped. — He is not prone to acts of destruction.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No — but he has more than once when his wishes were thwarted, threatened to take poison or drown himself

23. What are the habits of the patient as regards personal cleanliness and decorum?

He is very careless about personal cleanliness, and if not looked after, would go unwashed for days

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

He is in good health bodily —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

He has never been under such care.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

He has been carefully watched at home

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder is decidedly increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Silvanus Thompson
43 Union Terrace
York.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Henry Thompson whom I last saw at 43 Union Terrace, York, on the eighteenth day of Tenth month 1871, (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Henry Thompson

Signed, *Name,* Silvanus Thompson
Occupation (if any), Schoolmaster
Place of Abode, 43 Union Terrace, York
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this eighteenth Day of Tenth month One Thousand Eight Hundred and Seventy one.

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	William Henry Thompson
Sex and Age	Male - 22 years on 29th of Seventh month 1871
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Bookbinder
Religious persuasion, as far as known	attends the Catholic Apostolic Church
Previous Place of Abode	43 Union Terrace. York
Whether First Attack	First and continuous attack.
Age (if known) on First Attack	Not known
When and where previously under Care and Treatment	Never away from home under care
Duration of existing Attack	Many years
Supposed Cause	Illness in childhood
Whether subject to Epilepsy	No
Whether Suicidal	Has threatened it in words, but never made an attempt
Whether Dangerous to others	Yes when excited.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Silvanus Thompson. Union Terrace. York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Silvanus Thompson
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned John Hicks Nankivell
being a (a) Member of the Royal College of Surgeons in London and a Licentiate of the Society of Apothecaries in London
and being in actual practice as a (b) General Practitioner in York
hereby certify that I, on the seventeenth day of October 1871
at (c) 43 Union Terrace York
in the County of York separately from any other Medical Practitioner,
personally examined William Henry Thompson
of (d) 43 Union Terrace York and that
the said William Henry Thompson
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) – not only on the day mentioned but repeatedly during the last 4 years I have noticed that the patient's manner has been characterized by a heavy, stolid semi-idiotic expression – there has also been taciturnity and the countenance has had an insane, idiotic expression –

2. Other facts (if any) indicating Insanity communicated to me by others (g) Father & Mother from his ~~family~~ I have learnt that he has been in the habit of keeping by his bedside a long bar of iron which he might use with terrible force if incensed or phrenzied – they are with much cause afraid that he may do them harm

Signed, *Name,* J. H. Nankivell
Place of Abode, Boothams York

Dated this 18th day of October One Thousand Eight Hundred and Seventy one

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the eighteenth day of October
at (c) 43 Union Terrace York
in the county of York separately from any other Medical Practitioner,
personally examined William Henry Thompson
of (d) 43 Union Terrace York son of Silvanus Thompson and that
the said William Henry Thompson
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) I have known him for some years he is now & has been during the time I have known him imbecile his conversation is weak & not coherent & his conduct silly

2. Other facts (if any) indicating Insanity communicated to me by others (g) His father informs me that he is at times violent that he will strike without provocation – that he has not been able to learn any business

Signed, *Name,* S. W. North
Place of Abode, 31 Carlton York

Dated this 18th day of October One Thousand Eight Hundred and Seventy one

No 1184.
Annie Rutter

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Malton

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Amiable & Intelligent

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? An ordinary Boarding school Education at York.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Temperate and Domesticated habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Not Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Not to my knowledge.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not to my knowledge.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Disappointed affections

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 21 Years.

15. What has been the duration of the present attack? about 8 Weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? This first.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
A depression of spirits for a short time.

19. What were the first decided symptoms of mental aberration? Fear.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
afraid of being put to Prison death.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? None.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
None.

23. What are the habits of the patient as regards personal cleanliness and decorum?
Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Has always been in good health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Been attended by Mr Bailey Surgeon Malton

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
In my opinion the disorder is increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? To

Samuel Tuke Esqr
6 Low Ousegate
York.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Annie Rutter

whom I last saw at 6 Low Ousegate York.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 23 day of October. 1871 (a)

a (b) a person of unsound Mind as a Patient in your House.

Subjoined is a statement respecting the said Annie Rutter

Signed, *Name,* Samuel Rudames

Occupation (if any), Plumber & Glazier

Place of Abode, 6 Low Ousegate

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousin

Dated this 23 Day of October

One Thousand Eight Hundred and Seventy One.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Annie Rutter
Sex and Age	Female 31 years of age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Living with her Father.
Religious persuasion, as far as known	The Church of England
Previous Place of Abode	Malton
Whether First Attack	First
Age (if known) on First Attack	31 Years.
When and where previously under Care and Treatment	None
Duration of existing Attack	about 3 Weeks.
Supposed Cause	Disappointed affections
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Samuel Rudames. 6 Low Ousegate York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Samuel Rudames.

Occupation (if any), Plumber & Glazier

Place of Abode, Low Ousegate York.

Degree of Relationship (if any), or other circumstance of connexion with the Patient Cousin

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the twenty second day of October 1871 at (c) 6 Low Ouseyate York in the County of York separately from any other Medical Practitioner, personally examined Anne Rutter daughter of John Rutter of (d) Malton, retired grocer and that the said Anne Rutter is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) first excitement rambling incoherent conversation.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York

Dated this 22 day of October One Thousand Eight Hundred and Seventy one

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter being a (a) Member of the College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the twenty second day of October 1871 at (c) 6 Low Ouseyate - York in the county of York separately from any other Medical Practitioner, personally examined Anne Rutter daughter of John Rutter of (d) Malton retired grocer and that the said Anne Rutter is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is low & despondingly ~~fancies~~ that she has lost her soul & has committed sins known to the whole world

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her sister Mary Rutter tells me that she is subject to fits of violent excitement

Signed, *Name,* William Procter
Place of Abode, 24 Petergate - York

Dated this 22 day of Oct 1 One Thousand Eight Hundred and Seventy one

No 185.
Annie E. Dalton

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No.—

2. Where was the place of birth of the patient?

York.—

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.—

4. What appeared to be the disposition and character during the youth of the patient; were those marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

No.—

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Both understanding and affections were highly cultivated. She was instructed first at a day school and afterwards at a Boarding School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

In occupations, In all respects strictly conscientious and God-fearing

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at nineteen years and six months, eldest child living and one month. Youngest child thirteen months. Has had four children.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.—

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.—

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.—

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Suffered considerably from Hysteria for several months after the birth of first child, the tendency to hysteria remained [illegible] years, but not to a great extent

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No.—

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Abstinence from food, owing to a fear of dyspepsia She has during the past two years given up first one kind of food & then another till she has hardly taken anything but bread and butter or bread and cold lean mutton and very sparingly of these, This seems to have weakened her physical system so much that nervous debility and mental obliquity has followed.—

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About 26 years and 3 months

15. What has been the duration of the present attack?

about 3 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

———

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

a decided depression of spirits and a great dread of falling in the family-way

19. What were the first decided symptoms of mental aberration?

Refusal of food, battling against sleep, and neglect of family duties and personal appearance.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Refusal of food and ejection of it when administered by force, maintaining persistent silence, an apparent morbid love of self accusation, She mentioned in the earlier stage some overwhelming difficulty but could never be got to explain it, although affirming that it was not a vague but a clear and defined matter

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No.— on the contrary will carefully remove a worm from the path to a place of safety

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

To refuse food but not in any way to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

neglect of the calls of nature, but quite well conducted, chaste and decorous in other respects

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Great physical and nervous debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.—

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Food has been administered by mechanical means.—

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing — no lucid intervals or changes

———

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Mac Morran, Severus Place — York —

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Annie Elizabeth Holden whom I last saw at Severus Place . York. on the 31st day of October 1871 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Name omitted

Subjoined is a statement respecting the said Annie Elizabeth Holden

Signed, *Name,* James Holden
Occupation (if any), Engineer
Place of Abode, Saltney near Chester
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Husband

Dated this 31st Day of October
One Thousand Eight Hundred and Seventy one.

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Annie Elizabeth Holden.
Sex and Age	Female aged 26 years and 6 months
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Independent
Previous Place of Abode	Saltney near Chester
Whether First Attack	Yes
Age (if known) on First Attack	—
When and where previously under Care and Treatment	From 8 months till 21/10ms. at Denbro. & York
Duration of existing Attack	about 3 months
Supposed Cause	Physical debility
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	John Mac Morran, Severus Place . York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Holden
Occupation (if any), Engineer
Place of Abode, Saltney near Chester
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Husband

4444

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Isaac Mennell Williams
being a (a) Member of the Royal College of Surgeons, England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Thirtieth day of October 1871
at (c) 3 Severns Place, Holgate Rd.
in the County of York separately from any other Medical Practitioner, Engineer
personally examined Annie Elizabeth Holden wife of James Holden
of (d) Saltney Mr Chester and that
the said Annie Elizabeth Holden
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She is suffering from Melancholia, refuses to speak and take her food

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* D. M. Williams.
Place of Abode, 48 Micklegate York.
Dated this 30th day of October One Thousand Eight Hundred and Seventy one

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Thirtieth day of October 1871
at (c) 3 Severns Place Holgate Road York
in the county of York separately from any other Medical Practitioner, Engineer
personally examined Annie Elizabeth Holden wife of James Holden
of (d) Saltney Mr Chester and that
the said Annie Elizabeth Holden
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She has a melancholy dejected look, she refuses to speak - when told that I regarded her as insane and should certify for her removal to an Asylum she would make no reply - her expression is that of Melancholia.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr John Macmonan of 3 Severns Place informs me that she has been in a state of despondency for several weeks that she has refused food & takes no interest either in her family or children her husband confirms this statement

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York
Dated this 30th day of Oct One Thousand Eight Hundred and Seventy one

No 186. William Horsman

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

(a) House or Hospital.

was admitted into this (*a*) as a Private Patient, on the

. Day of 187 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was

(*b*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

received (*b*).

Signed, _____

(*c*) _____

_____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Seventy

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive William Henry Horniman whom I last saw at Coombe Cliff Croydon on the 28th day of December 1871 (a) a (b) Lunatic as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said William Henry Horniman

Signed, *Name,* Ann Horniman

Occupation (if any), _____

Place of Abode, Coombcliff Croydon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this thirtieth Day of December One Thousand Eight Hundred and Seventy one

To Dr. Pitching (c) superintendent of Friends (d) Friends Retreat York

(c) Proprietor or superintendent of.

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	William Henry Horniman
Sex and Age	Male, age about forty
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentleman: previously Merchant
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	41 London road Croydon
Whether First Attack	no
Age (if known) on First Attack	Thirty Eight
When and where previously under Care and Treatment	At the Retreat York
Duration of existing Attack	4 days
Supposed Cause	Excitement in visiting place of business & former friends.
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	John Horniman Coombe Cliff Croydon

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Ann Horniman

Occupation (if any), none

Place of Abode, Coombcliff House Croydon

Degree of Relationship (if any) or other circumstances of connexion with the Patient Mother

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Henry Thomas Lanchester
being a (a) Doctor of Medicine of London Univ. & Fellow of the R. College of Surgeons
and being in actual practice as a (b) general practitioner
hereby certify, that I, on the twenty ninth Day of December
at (c) Coombe Cliff, Croydon
in the County of Surrey separately from any other Medical Practitioner
personally examined William Henry Horniman
of (d) 41 London Road. Croydon and that
the said William Henry Horniman
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

Walking wildly about his bed-room stripped naked — talking incoherently: holding imaginary conversations with individuals not present — occasional attacks of excitement with shouting &c —

2. Other facts (if any) indicating Insanity communicated to me by others (g)

—

Signed, *Name,* Henry T. Lanchester M.D.

Place of abode, Lansdowne Road Croydon

Dated this twenty ninth Day of December One Thousand Eight Hundred and Seventy one —

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Edward Bemrey
being a (a) a Fellow of the Royal College of Surgeons &c
and being in actual practice as a (b) General practitioner
hereby certify, that I, on the twenty ninth Day of December 1871.
at (c) Coombe Cliffe — Croydon.
in the County of Surrey separately from any other Medical Practitioner,
personally examined William Henry Horniman
of (d) 41 London Road Croydon. and that
the said William Henry Horniman
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

Complete incoherency — incessant talking — giving wild & senseless directions & making observations of the same kind — a practical want of proper appreciation of ordinary articles in his Bedroom — wildly asking for a tumbler of water & insisting that the looking glass should be bescheed

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Obstinate refusal to dress himself — refusal to take food — communicated to me by Miss Helmsley, a relative by marriage of the patient.

Signed, *Name,* Edw.d Bemrey. F.R.C.S. & L.A.S.

Place of Abode 73 High St — Croydon —

Dated this twenty ninth Day of December One Thousand Eight Hundred and Seventy one

No 1187.
Jane C. Ogden

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

The grand-daughter of a Member of the Society. Her deceased husband also the Grandson of a member of the same

2. Where was the place of birth of the patient?

Sunderland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Decided Affectionate, warm, character, firm, & understanding average. No peculiarity observable. A slight deficiency of mind and disposition to secretiveness, and on the other hand, some indecision or despair, to which a disposition to melancholy may perhaps be referred

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Both had the usual cultivation in her sphere of life. Instruction principally at home

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation. Habits always good

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married in 1852 at the age of 25. Left a widow in 1856 with two sons, now aged 13 and 17.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Her occupations, habits & pursuits have always been of a domestic character, and her devotion to them has been unremitting and an absorbing principle of life

Music in earlier life, before marriage, was the pursuit, alone practised with perseverance & ability. Rather a special talent. Religion was always a strong sentiment, and has been very absorbing since the death of her husband

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No change of recent date. Her husband's property was at first involved, and disappointment in part of his affairs caused considerable anxiety, but until not later than 4 years ago there was no great pressure

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

Years preceded the conduct of the eldest son caused much anxiety about the matter of

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

In girlhood ~~for~~ a year from typhus fever ~~from which~~ for a long period she remained for six weeks, after, subject to it, a very delicate sleep, and still has a tendency to it, with supine & torpid habit from cold, especially for the last some months since she has been out of the house.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

From what is known of ~~and~~ no relations insane. A morbidly nervous habit seems to exist on the maternal side, but some relatives have attained to extreme old age

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Anxiety of mind on account of her Eldest son - and also anxiety on account of the pecuniary position of herself & children (two) - These operating at a time when her physical health was in a critical state

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

46-45

15. What has been the duration of the present attack?

about two years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was much depression & reserve – The sleep for many months was broken & health generally feeble

19. What were the first decided symptoms of mental aberration?

Cutting off her hair in obedience to Gods will – refusal to continue to live with her sisters, also in consequence of Gods direct command.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Her leading delusion is that she was directed by God to do certain things & many humiliating things on her brow, & that has the been permitted by others to go on doing so for the short time longer she would have been permanently forgiven by God. & that she would have been united in marriage to a Clergyman whom she loves. But that inasmuch as she was prevented from doing Gods Command all this is at an end; & besides she is eternally lost

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

* She will expire suddenly in the act of striking as the second stroke is invariably fatal when directed under the pericardium from behind.

There is no tendency to destruction deliberately or persistently developed into action as yet: though sometimes, from time to time, used there is no knowledge of the act during paroxysm of the mind. There have been acts of violence

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

See. Case

Refer to momentary fits of * Confusion & Determination, but nothing dangerous

23. What are the habits of the patient as regards personal cleanliness and decorum?

very good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Menstruation is arrested – Her sleep broken – and there have been frequent fits of Syncope. The menopause has not occurred but is impending

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Not been in any

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None for some months – before then attendance was directed to improve general health.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing – There is no day, nor hour, when her delusion ceases to leave her.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joseph M. A. Brown
(Office) 3-3, Villiers St
Sunderland

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Chapman Ogden whom I last saw at 19 Frederick Street, Sunderland on the sixth — day of February instant (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Jane Chapman Ogden

Signed, *Name,* Jos. M. A. Brown
Occupation (if any), Solr
Place of Abode, 53 Villiers Street, Sunderland
Degree of Relationship (if any), or other circumstances of connexion with the Patient }

Dated this 6th Day of February
One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Jane Chapman Ogden
Sex and Age	Female; age 47
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Gentlewoman. For a short time on visit to Miss Hutton
Religious persuasion, as far as known	Church of England
Previous Place of Abode	19, Frederick St, Sunderland
Whether First Attack	Yes
Age (if known) on First Attack	45
When and where previously under Care and Treatment	October
Duration of existing Attack	about a year actively developed
Supposed Cause	Maternal anxiety, acting on an unstable mind morbidly religious and conscientious at the critical period with females.
Whether subject to Epilepsy	No.
Whether Suicidal	Not positively developed but symptoms required. present to the mind & have been detected, but not dangerous. Has been detected, but not personally to any one, only momentarily to a solicitor, whom she feared had opposed her
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Joseph M. A. Brown 53, Villiers St, Sunderland

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Jos M. A. Brown
Occupation (if any), Solicitor
Place of Abode, 53, Villiers St, Sunderland
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Brother and Trustee

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Edward Charlton being a (a) Physician practising at Newcastle on Tyne and a Doctor of Medicine of the University of Edinburgh and being in actual practice as a (b) Physician in Newcastle on Tyne hereby certify that I, on the sixth day of February instant at (c) 19 Frederick St., Sunderland in the County of Durham separately from any other Medical Practitioner, personally examined Jane Chapman Ogden of (d) 19, Frederick Street aforesaid Widow and that the said Jane Chapman Ogden is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Delusions regarding her salvation, that she is rejected by God and indicated by him to wear a bandwith the word "Judas" on her brow - which she did for a considerable time. Is much deprived in spirits and very irritable

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Violence towards her sister } communicated by Mr. Morgan, Miss A. Brown & Mr. Brown
Contemplation of suicide

Signed, *Name,* Edward Charlton M.D.
Place of Abode, Eldon Square. Newcastle on Tyne

Dated this Sixth day of February One Thousand Eight Hundred and Seventy two

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Blacker Morgan being a (a) Licentiate of the Royal College of Surgeons Ireland and a Licentiate of the Apothecaries Company London and being in actual practice as a (b) Surgeon hereby certify, that I on the fifth day of February instant at (c) 19 Frederick St., Sunderland in the county of Durham separately from any other Medical Practitioner, personally examined Jane Chapman Ogden of (d) 19, Frederick Street aforesaid, Widow and that the said Jane Chapman Ogden is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) First. Extreme depression of spirits - second Her re-iterated assertion that she was lost eternally. Third. The wearing of written badges upon her brow bearing absurd accusations against herself; & which she wore in obedience to the command of God, directly given to her.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
1 Violence to her sister } Both communicated to me by her sister Miss Susan Brown.
2 Contemplated suicide

Signed, *Name,* G. B. Morgan
Place of Abode, Sunderland.

Dated this Sixth day of February One Thousand Eight Hundred and Seventy two

N.° 1188.

Betsey Labrey

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Clayton near Bradford, Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? There was nothing observable in the patient as to peculiarity or decisiveness of any kind, except Hysteria

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was educated at a Ladies private Seminary at Knaresborough, attended the Church of England, & was always allowed by the Lady of the School for the poor Children to attend

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Instructed in Domestic Duties at Home, always fond of reading the Bible & attending regularly both Church & Chapel

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. She was married at Twenty five years of age, one Child (a Daughter) twenty two years old

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Always had a strong religious Bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Six months after Marriage, her Husband ran away to America, in order to avoid his Creditors during the Railway Mania; & they have never lived together since

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? I presume the regretted the Marriage she had made, & it has probably occurred to her again

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Twenty six

15. What has been the duration of the present attack? Three Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Once previously, for about 14 Days when her Daughter was born, in the form of puerperal Insanity

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? Yes, Twenty two years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Since her Mother's Death which occurred in July 1869 she has been more still & reserved

19. What were the first decided symptoms of mental aberration? Depression of Spirits, owing to her Father's serious Illness

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. She wanders in her conversation, speaks on Religious Subjects, & has a great desire to get to Heaven

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? None whatever

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Yes occasionally: No, none whatever

23. What are the habits of the patient as regards personal cleanliness and decorum? She has always been very exact

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. She has never been under the Care of any either public or private Hospital

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? She has been under her usual Medical attendant for some Months, with no beneficial Result

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Gradually increasing, without any lucid Intervals

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Cowling Ackroyd,
No 1 Jackson Place,
Bradford.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Betsey Labroy whom I last saw at No 1 Carlton Place Bradford on the Nineteenth day of February 1872 (a) a (b) Person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Betsey Labroy

Signed, *Name,* Fowling Ackroyd
Occupation (if any), Manufacturer
Place of Abode, Carlton Place Bradford
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Nineteenth Day of February
One Thousand Eight Hundred and Seventy Two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

1870
1872
18
48
66

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Betsey Labroy
Sex and Age	Female Forty eight
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Housekeeper to her Father
Religious persuasion, as far as known	Church of England
Previous Place of Abode	1 Carlton Place Bradford
Whether First Attack	First attack of a lengthy Duration
Age (if known) on First Attack	Last attack at twenty six
When and where previously under Care and Treatment	At Home
Duration of existing Attack	Three Months
Supposed Cause	Over anxiety
Whether subject to Epilepsy	No
Whether Suicidal	No, with the exception of occasionally refusing Food
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Fowling Ackroyd, 1 Carlton Place, Bradford.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Francis Ackroyd,
Occupation (if any), Commission Merchant
Place of Abode, 183 Upper Brook Street, Manchester.
Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother.

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Fellow of the Royal College of Surgeons of England

(b) Physician, surgeon, or apothecary, *as the case may be.*

and being in actual practice as a (b) Surgeon

hereby certify that I, on the eighteenth day of February 1892

(c) *Here insert the street and number of the house (if any), or other like particulars*

at (c) No 1. Carlton Place Horton Road Bradford

in the County of York separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Betsey Labrey of (d) 1 Carlton Place Horton Road Bradford ~~Widow~~ and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Betsey Labrey is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She has a dullen look refuses to answer questions or to put her tongue out,

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her father and nurse tell me that she will not get up from bed. sometimes refuses food, talks to herself particularly in the night, especially about dying. asked the nurse whether she was not going to be put away. & about 10 days ago got out of the house & wandered away but was soon found & brought back.

Signed, *Name,* Richard Henry Meade

Place of Abode, 8 Manor Row Bradford

Dated this eighteenth day of February One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Doctor of Medicine and Licentiate of the Royal College of Surgeon of London

(b) Physician, surgeon, or apothecary, *as the case may be.*

and being in actual practice as a (b) general practitioner

hereby certify, that I on the eighteenth day of February 1892

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) 1 Carlton Place & Horton Road Bradford

in the county of York separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Betsey Labrey of (d) 1 Carlton Place Horton Road Bradford and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Betsey Labrey is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is taciturn and refuses to answer questions whether kindly or peremptorily put. She weeps from slight causes. I could not gether to get anything - and she refused to give any statement whether with respect to herself or her friends or relatives - in all respects she conducts herself in a way decidedly opposite to that her friends formerly noticed

(g) *Here state the information, and from whom.*

towards her

2. Other facts (if any) indicating Insanity communicated to me by others (g) she persists in saying she refuses food, wishes to die. and to the end of restraint - has got out of the house and wandered away for a short time -

Signed, *Name,* David Goyder

Place of Abode, 62 Great Horton Road Bradford

Dated this eighteenth day of February One Thousand Eight Hundred and Seventy two.

No 1184.
Annie Rutter

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Malton

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Amiable & Intelligent

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? An ordinary Boarding school Education at York.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Temperate and Domesticated habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Not Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Not to my knowledge.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not to my knowledge.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Disappointed affections

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 21 Years.

15. What has been the duration of the present attack? about 8 Weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? This first.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
A depression of spirits for a short time.

19. What were the first decided symptoms of mental aberration? Fear.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
afraid of being put to Prison death.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? None.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
None.

23. What are the habits of the patient as regards personal cleanliness and decorum?
Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Has always been in good health.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Been attended by Mr Bailey Surgeon Malton

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
In my opinion the disorder is increasing.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? To

Samuel Tuke Esqr
6 Low Ousegate
York.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Annie Rutter

whom I last saw at 6 Low Ousegate York.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 23 day of October. 1871 (a)

a (b) a person of unsound Mind as a Patient in your House.

Subjoined is a statement respecting the said Annie Rutter

Signed, *Name,* Samuel Rudames

Occupation (if any), Plumber & Glazier

Place of Abode, 6 Low Ousegate

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousin

Dated this 23 Day of October

One Thousand Eight Hundred and Seventy One.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Annie Rutter
Sex and Age	Female 31 years of age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Living with her Father.
Religious persuasion, as far as known	The Church of England
Previous Place of Abode	Malton
Whether First Attack	First
Age (if known) on First Attack	31 Years.
When and where previously under Care and Treatment	None
Duration of existing Attack	about 3 Weeks.
Supposed Cause	Disappointed affections
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Samuel Rudames. 6 Low Ousegate York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Samuel Rudames.

Occupation (if any), Plumber & Glazier

Place of Abode, Low Ousegate York.

Degree of Relationship (if any), or other circumstance of connexion with the Patient Cousin

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the twenty second day of October 1871 at (c) 6 Low Ouseyate York in the County of York separately from any other Medical Practitioner, personally examined Anne Rutter daughter of John Rutter of (d) Malton, retired grocer and that the said Anne Rutter is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) first excitement rambling incoherent conversation.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York

Dated this 22 day of October One Thousand Eight Hundred and Seventy one

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Procter being a (a) Member of the College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the twenty second day of October 1871 at (c) 6 Low Ouseyate - York in the county of York separately from any other Medical Practitioner, personally examined Anne Rutter daughter of John Rutter of (d) Malton retired grocer and that the said Anne Rutter is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is low & despondingly ~~fancies~~ that she has lost her soul & has committed sins known to the whole world

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her sister Mary Rutter tells me that she is subject to fits of violent excitement

Signed, *Name,* William Procter
Place of Abode, 24 Petergate - York

Dated this 22 day of Oct 1 One Thousand Eight Hundred and Seventy one

No 185.
Annie E. Dalton

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No.—

2. Where was the place of birth of the patient?

York.—

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.—

4. What appeared to be the disposition and character during the youth of the patient; were those marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

No.—

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Both understanding and affections were highly cultivated. She was instructed first at a day school and afterwards at a Boarding School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

In occupations, In all respects strictly conscientious and God-fearing

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at nineteen years and six months, eldest child living and one month. Youngest child thirteen months. Has had four children.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.—

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No.—

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.—

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Suffered considerably from Hysteria for several months after the birth of first child, the tendency to hysteria remained [illegible] years, but not to a great extent

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No.—

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Abstinence from food, owing to a fear of dyspepsia She has during the past two years given up first one kind of food & then another till she has hardly taken anything but bread and butter or bread and cold lean mutton and very sparingly of these, This seems to have weakened her physical system so much that nervous debility and mental obliquity has followed.—

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

About 26 years and 3 months

15. What has been the duration of the present attack?

about 3 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

———

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

a decided depression of spirits and a great dread of falling in the family-way

19. What were the first decided symptoms of mental aberration?

Refusal of food, battling against sleep, and neglect of family duties and personal appearance.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Refusal of food and ejection of it when administered by force, maintaining persistent silence, an apparent morbid love of self accusation, She mentioned in the earlier stage some overwhelming difficulty but could never be got to explain it, although affirming that it was not a vague but a clear and defined matter

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No.— on the contrary will carefully remove a worm from the path to a place of safety

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

To refuse food but not in any way to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

neglect of the calls of nature, but quite well conducted, chaste and decorous in other respects

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Great physical and nervous debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.—

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Food has been administered by mechanical means.—

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing — no lucid intervals or changes

———

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Mac Morran, Severus Place — York —

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Annie Elizabeth Holden whom I last saw at Severus Place . York. on the 31st day of October 1871 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Name omitted

Subjoined is a statement respecting the said Annie Elizabeth Holden

Signed, *Name,* James Holden
Occupation (if any), Engineer
Place of Abode, Saltney near Chester
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Husband

Dated this 31st Day of October
One Thousand Eight Hundred and Seventy one.

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Annie Elizabeth Holden.
Sex and Age	Female aged 26 years and 6 months
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Independent
Previous Place of Abode	Saltney near Chester
Whether First Attack	Yes
Age (if known) on First Attack	—
When and where previously under Care and Treatment	From 8 months till 21/10ms. at Denbro. & York
Duration of existing Attack	about 3 months
Supposed Cause	Physical debility
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	John Mac Morran, Severus Place . York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Holden
Occupation (if any), Engineer
Place of Abode, Saltney near Chester
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Husband

4444

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Isaac Mennell Williams
being a (a) Member of the Royal College of Surgeons, England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Thirtieth day of October 1871
at (c) 3 Severns Place, Holgate Rd.
in the County of York separately from any other Medical Practitioner, Engineer
personally examined Annie Elizabeth Holden wife of James Holden
of (d) Saltney Mr Chester and that
the said Annie Elizabeth Holden
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She is suffering from Melancholia, refuses to speak and take her food

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* D. M. Williams.
Place of Abode, 48 Micklegate York.
Dated this 30th day of October One Thousand Eight Hundred and Seventy one

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Thirtieth day of October 1871
at (c) 3 Severns Place Holgate Road York
in the county of York separately from any other Medical Practitioner, Engineer
personally examined Annie Elizabeth Holden wife of James Holden
of (d) Saltney Mr Chester and that
the said Annie Elizabeth Holden
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She has a melancholy dejected look, she refuses to speak - when told that I regarded her as insane and should certify for her removal to an Asylum she would make no reply - her expression is that of Melancholia.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr John Macmonan of 3 Severns Place informs me that she has been in a state of despondency for several weeks that she has refused food & takes no interest either in her family or children her husband confirms this statement

Signed, *Name,* S. W. North
Place of Abode, 31 Castlegate York
Dated this 30th day of Oct One Thousand Eight Hundred and Seventy one

No 186. William Horsman

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

.

(a) House or Hospital.

was admitted into this (*a*) as a Private Patient, on the

. Day of 187 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was

(*b*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

received (*b*).

Signed, _____

(*c*) _____

_____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Seventy

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive William Henry Horniman whom I last saw at Coombe Cliff Croydon on the 28th day of December 1871 (a) a (b) Lunatic as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said William Henry Horniman

Signed, *Name,* Ann Horniman

Occupation (if any), _____

Place of Abode, Coombcliff Croydon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this thirtieth Day of December One Thousand Eight Hundred and Seventy one

To Dr. Pitching (c) superintendent of Friends (d) Friends Retreat York

(c) Proprietor or superintendent of.

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	William Henry Horniman
Sex and Age	Male, age about forty
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentleman: previously Merchant
Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	41 London road Croydon
Whether First Attack	no
Age (if known) on First Attack	Thirty Eight
When and where previously under Care and Treatment	At the Retreat York
Duration of existing Attack	4 days
Supposed Cause	Excitement in visiting place of business & former friends.
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	John Horniman Coombe Cliff Croydon

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Ann Horniman

Occupation (if any), none

Place of Abode, Coombcliff House Croydon

Degree of Relationship (if any) or other circumstances of connexion with the Patient Mother

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Henry Thomas Lanchester
being a (a) Doctor of Medicine of London Univ. & Fellow of the R. College of Surgeons
and being in actual practice as a (b) general practitioner
hereby certify, that I, on the twenty ninth Day of December
at (c) Coombe Cliff, Croydon
in the County of Surrey separately from any other Medical Practitioner
personally examined William Henry Horniman
of (d) 41 London Road. Croydon and that
the said William Henry Horniman
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

Walking wildly about his bed-room stripped naked — talking incoherently: holding imaginary conversations with individuals not present — occasional attacks of excitement with shouting &c —

2. Other facts (if any) indicating Insanity communicated to me by others (g)

—

Signed, *Name,* Henry T. Lanchester M.D.

Place of abode, Lansdowne Road Croydon

Dated this twenty ninth Day of December One Thousand Eight Hundred and Seventy one —

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Edward Bemrey
being a (a) a Fellow of the Royal College of Surgeons &c
and being in actual practice as a (b) General practitioner
hereby certify, that I, on the twenty ninth Day of December 1871.
at (c) Coombe Cliffe — Croydon.
in the County of Surrey separately from any other Medical Practitioner,
personally examined William Henry Horniman
of (d) 41 London Road Croydon. and that
the said William Henry Horniman
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

Complete incoherency — incessant talking — giving wild & senseless directions & making observations of the same kind — a practical want of proper appreciation of ordinary articles in his Bedroom — wildly asking for a tumbler of water & insisting that the looking glass should be bescheed

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Obstinate refusal to dress himself — refusal to take food — communicated to me by Miss Helmsley, a relative by marriage of the patient.

Signed, *Name,* Edw.d Bemrey. F.R.C.S. & L.A.S.

Place of Abode 73 High St — Croydon —

Dated this twenty ninth Day of December One Thousand Eight Hundred and Seventy one

No 1187.
Jane C. Ogden

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

The grand-daughter of a Member of the Society. Her deceased husband also the Grandson of a member of the same

2. Where was the place of birth of the patient?

Sunderland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Decided Affectionate, warm, character, firm, & understanding average. No peculiarity observable. A slight deficiency of mind and disposition to secretiveness, and on the other hand, some indecision or despair, to which a disposition to melancholy may perhaps be referred

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Both had the usual cultivation in her sphere of life. Instruction principally at home

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation. Habits always good

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married in 1852 at the age of 25. Left a widow in 1856 with two sons, now aged 13 and 17.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Her occupations, habits & pursuits have always been of a domestic character, and her devotion to them has been unremitting and an absorbing principle of life

Music in earlier life, before marriage, was the pursuit, alone practised with perseverance & ability. Rather a special talent. Religion was always a strong sentiment, and has been very absorbing since the death of her husband

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No change of recent date. Her husband's property was at first involved, and disappointment in part of his affairs caused considerable anxiety, but until not later than 4 years ago there was no great pressure

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

Years preceded the conduct of the eldest son caused much anxiety about the matter of

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

In girlhood ~~for~~ a year from typhus fever ~~from which~~ for a long period she remained for six weeks, after, subject to it, a very delicate sleep, and still has a tendency to it, with supine & torpid habit from cold, especially for the last some months since she has been out of the house.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

From what is known of ~~and~~ no relations insane. A morbidly nervous habit seems to exist on the maternal side, but some relatives have attained to extreme old age

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Anxiety of mind on account of her Eldest son - and also anxiety on account of the pecuniary position of herself & children (two) - These operating at a time when her physical health was in a critical state

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

46-45

15. What has been the duration of the present attack?

about two years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was much depression & reserve – The sleep for many months was broken & health generally feeble

19. What were the first decided symptoms of mental aberration?

Cutting off her hair in obedience to Gods will – refusal to continue to live with her sisters, also in consequence of Gods direct command.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Her leading delusion is that she was directed by God to do certain things & many humiliating things on her brow, & that has the been permitted by others to go on doing so for the short time longer she would have been permanently forgiven by God. & that she would have been united in marriage to a Clergyman whom she loves. But that inasmuch as she was prevented from doing Gods Command all this is at an end; & besides she is eternally lost

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

* She will expire suddenly in the act of striking as the second stroke is invariably fatal when directed under the pericardium from behind.

There is no tendency to destruction deliberately or persistently developed into action as yet: though sometimes, from time to time, used there is no knowledge of the act during paroxysm of the mind. There have been acts of violence

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

See. Case

Refer to momentary fits of * Confusion & Determination, but nothing dangerous

23. What are the habits of the patient as regards personal cleanliness and decorum?

very good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Menstruation is arrested – Her sleep broken – and there have been frequent fits of Syncope. The menopause has not occurred but is impending

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Not been in any

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None for some months – before then attendance was directed to improve general health.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing – There is no day, nor hour, when her delusion ceases to leave her.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Joseph M. A. Brown
(Office) 3-3, Villiers St
Sunderland

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Chapman Ogden whom I last saw at 19 Frederick Street, Sunderland on the sixth — day of February instant (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Jane Chapman Ogden

Signed, *Name,* Jos. M. A. Brown
Occupation (if any), Solr
Place of Abode, 53 Villiers Street, Sunderland
Degree of Relationship (if any), or other circumstances of connexion with the Patient }

Dated this 6th Day of February
One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Jane Chapman Ogden
Sex and Age	Female; age 47
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Gentlewoman. For a short time on visit to Miss Hutton
Religious persuasion, as far as known	Church of England
Previous Place of Abode	19, Frederick St, Sunderland
Whether First Attack	Yes
Age (if known) on First Attack	45
When and where previously under Care and Treatment	October
Duration of existing Attack	about a year actively developed
Supposed Cause	Maternal anxiety, acting on an unstable mind morbidly religious and conscientious at the critical period with females.
Whether subject to Epilepsy	No.
Whether Suicidal	Not positively developed but symptoms required. present to the mind & have been detected, but not dangerous. Has been detected, but not personally to any one, only momentarily to a solicitor, whom she feared had opposed her
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Joseph M. A. Brown 53, Villiers St, Sunderland

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Jos M. A. Brown
Occupation (if any), Solicitor
Place of Abode, 53, Villiers St, Sunderland
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Brother and Trustee

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Edward Charlton being a (a) Physician practising at Newcastle on Tyne and a Doctor of Medicine of the University of Edinburgh and being in actual practice as a (b) Physician in Newcastle on Tyne hereby certify that I, on the sixth day of February instant at (c) 19 Frederick St., Sunderland in the County of Durham separately from any other Medical Practitioner, personally examined Jane Chapman Ogden of (d) 19, Frederick Street aforesaid Widow and that the said Jane Chapman Ogden is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Delusions regarding her salvation, that she is rejected by God and indicated by him to wear a bandwith the word "Judas" on her brow - which she did for a considerable time. Is much deprived in spirits and very irritable

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Violence towards her sister } communicated by Mr. Morgan, Miss A. Brown & Mr. Brown
Contemplation of suicide

Signed, *Name,* Edward Charlton M.D.
Place of Abode, Eldon Square. Newcastle on Tyne

Dated this Sixth day of February One Thousand Eight Hundred and Seventy two

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, George Blacker Morgan being a (a) Licentiate of the Royal College of Surgeons Ireland and a Licentiate of the Apothecaries Company London and being in actual practice as a (b) Surgeon hereby certify, that I on the fifth day of February instant at (c) 19 Frederick St., Sunderland in the county of Durham separately from any other Medical Practitioner, personally examined Jane Chapman Ogden of (d) 19, Frederick Street aforesaid, Widow and that the said Jane Chapman Ogden is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) First. Extreme depression of spirits - second Her re-iterated assertion that she was lost eternally. Third. The wearing of written badges upon her brow bearing absurd accusations against herself; & which she wore in obedience to the command of God, directly given to her.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
1 Violence to her sister } Both communicated to me by her sister Miss Susan Brown.
2 Contemplated suicide

Signed, *Name,* G. B. Morgan
Place of Abode, Sunderland.

Dated this Sixth day of February One Thousand Eight Hundred and Seventy two

N.° 1188.

Betsey Labrey

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Clayton near Bradford, Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? There was nothing observable in the patient as to peculiarity or decisiveness of any kind, except Hysteria

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was educated at a Ladies private Seminary at Knaresborough, attended the Church of England, & was always allowed by the Lady of the School for the poor Children to attend

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Instructed in Domestic Duties at Home, always fond of reading the Bible & attending regularly both Church & Chapel

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. She was married at Twenty five years of age, one Child (a Daughter) twenty two years old

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Always had a strong religious Bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Six months after Marriage, her Husband ran away to America, in order to avoid his Creditors during the Railway Mania; & they have never lived together since

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? I presume the regretted the Marriage she had made, & it has probably occurred to her again

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Twenty six

15. What has been the duration of the present attack? Three Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Once previously, for about 14 Days when her Daughter was born, in the form of puerperal Insanity

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? Yes, Twenty two years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Since her Mother's Death which occurred in July 1869 she has been more still & reserved

19. What were the first decided symptoms of mental aberration? Depression of Spirits, owing to her Father's serious Illness

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. She wanders in her conversation, speaks on Religious Subjects, & has a great desire to get to Heaven

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? None whatever

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Yes occasionally: No, none whatever

23. What are the habits of the patient as regards personal cleanliness and decorum? She has always been very exact

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. She has never been under the Care of any either public or private Hospital

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? She has been under her usual Medical attendant for some Months, with no beneficial Result

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Gradually increasing, without any lucid Intervals

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Cowling Ackroyd,
No 1 Jackson Place,
Bradford.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Betsey Labroy whom I last saw at No 1 Carlton Place Bradford on the Nineteenth day of February 1872 (a) a (b) Person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Betsey Labroy

Signed, *Name,* Fowling Ackroyd
Occupation (if any), Manufacturer
Place of Abode, Carlton Place Bradford
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Nineteenth Day of February
One Thousand Eight Hundred and Seventy Two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

1870
1872
18
48
66

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Betsey Labroy
Sex and Age	Female Forty eight
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Housekeeper to her Father
Religious persuasion, as far as known	Church of England
Previous Place of Abode	1 Carlton Place Bradford
Whether First Attack	First attack of a lengthy Duration
Age (if known) on First Attack	Last attack at twenty six
When and where previously under Care and Treatment	At Home
Duration of existing Attack	Three Months
Supposed Cause	Over anxiety
Whether subject to Epilepsy	No
Whether Suicidal	No, with the exception of occasionally refusing Food
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Fowling Ackroyd, 1 Carlton Place, Bradford.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Francis Ackroyd,
Occupation (if any), Commission Merchant
Place of Abode, 183 Upper Brook Street, Manchester.
Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother.

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Fellow of the Royal College of Surgeons of England

(b) Physician, surgeon, or apothecary, *as the case may be.*

and being in actual practice as a (b) Surgeon

hereby certify that I, on the eighteenth day of February 1892

(c) *Here insert the street and number of the house (if any), or other like particulars*

at (c) No 1. Carlton Place Horton Road Bradford

in the County of York separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Betsey Labrey of (d) 1 Carlton Place Horton Road Bradford ~~Widow~~ and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Betsey Labrey is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She has a dullen look refuses to answer questions or to put her tongue out,

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her father and nurse tell me that she will not get up from bed. sometimes refuses food, talks to herself particularly in the night, especially about dying. asked the nurse whether she was not going to be put away. & about 10 days ago got out of the house & wandered away but was soon found & brought back.

Signed, *Name,* Richard Henry Meade

Place of Abode, 8 Manor Row Bradford

Dated this eighteenth day of February One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Doctor of Medicine and Licentiate of the Royal College of Surgeon of London

(b) Physician, surgeon, or apothecary, *as the case may be.*

and being in actual practice as a (b) general practitioner

hereby certify, that I on the eighteenth day of February 1892

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) 1 Carlton Place & Horton Road Bradford

in the county of York separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Betsey Labrey of (d) 1 Carlton Place Horton Road Bradford and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Betsey Labrey is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is taciturn and refuses to answer questions whether kindly or peremptorily put. She weeps from slight causes. I could not gether to get anything - and she refused to give any statement whether with respect to herself or her friends or relatives - in all respects she conducts herself in a way decidedly opposite to that her friends formerly noticed

(g) *Here state the information, and from whom.*

towards her

2. Other facts (if any) indicating Insanity communicated to me by others (g) she persists in saying she refuses food, wishes to die. and to the end of restraint - has got out of the house and wandered away for a short time -

Signed, *Name,* David Goyder

Place of Abode, 62 Great Horton Road Bradford

Dated this eighteenth day of February One Thousand Eight Hundred and Seventy two.

1189 Deborah Atkinson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Deborah Atkinson whom I last saw at 20 Belle Vue Street York. on the twenty eighth day of Second Month 1872(a) a person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Deborah Atkinson

Signed, *Name,* Sarah Atkinson
Occupation (if any),
Place of Abode, 20 Belle Vue Street
Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister.

Dated this 28th Day of 2nd Month 1872.

One Thousand Eight Hundred and Seventy two.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Deborah Atkinson
Sex and Age	Female 62 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Belle Vue Street York
Whether First Attack	No
Age (if known) on First Attack	About 29 years
When and where previously under Care and Treatment	At the Retreat
Duration of existing Attack	a Months.
Supposed Cause	Anxiety about a delicate sister
Whether subject to Epilepsy	No
Whether Suicidal	— suspected to be so.
Whether Dangerous to others	— has felt a temptation to do injury to others
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sarah Atkinson. 20 Belle Vue Street

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Mason
Occupation (if any), Farmer
Place of Abode, Heslington Road, York
Degree of Relationship (if any), or other circumstance of connexion with the Patient Cousin.

451

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothocaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Isaac Mennell Williams —
being a (a) Member of the Royal College of Surgeons, Eng:
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the 28th day of February 1872
at (c) 20 Belle Vue St Heslington Rd. York
in the County of York separately from any other Medical Practitioner,
personally examined Deborah Atkinson, Spinster —
of (d) 20 Belle Vue St and that
the said Deborah Atkinson
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Depressed and desponding state of mind — She states that she feels an irresistible impulse to injure her sister with whom she resides —

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* I. M. Williams —
Place of Abode, 48 Micklegate. York
Dated this 28th day of February One Thousand Eight Hundred and Seventy two —

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothocaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 28th day of February
at (c) 20 Belle Vue Street York
in the county of York separately from any other Medical Practitioner,
personally examined Deborah Atkinson Spinster
of (d) 20 Belle Vue Street York and that
the said Deborah Atkinson
is a (e) Lunatic. and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Great Depression of Spirits a belief that she is lost & that the Devil has possession of her

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S W North
Place of Abode, 31 Castlegate York
Dated this 28th day of February One Thousand Eight Hundred and Seventy two.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

1190 Lucy A Vincent

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

PECKHAM HOUSE ASYLUM.

I hereby give you Notice, That

.

was admitted into this (*a*)) as a Private Patient, on the

. Day of 18 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (*b*).

(*a*) House or hospital.

(*b*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, ...

Superintendent of Peckham House, Surrey.

Dated this Day of

One Thousand Eight Hundred and

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive
Lucy Anna Vincent
whom I last saw at 28 Mornington Crescent
on the 3rd day of October 1865.
a (b) person of unsound mind as a Patient into your House.
Subjoined is a Statement respecting the said Lucy Anna Vincent

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, *Name,* Lucy Vincent
Occupation (if any), Lady
Place of Abode 28 Mornington Crescent
Degree of Relationship (if any), or other circumstances of connection with the Patient Mother

Dated this 3rd day of October
One Thousand Eight Hundred and 65.

To Dr. Armstrong & Co.,
Proprietors of Peckham House, Surrey.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Lucy Anna Vincent
Sex and Age	Female 24.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	None
Religious Persuasion, as far as known	Friends Society
Previous Place of Abode	28 Mornington Crescent.
Whether First Attack	no
Age (if known) on First Attack	not known
When and where previously under Care and Treatment	Dr Armstrongs Peckham last year
Duration of existing Attack	a Fortnight
Supposed Cause	not known
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	Query
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Mrs Vincent Mother 28 Mornington Crescent.

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, *Name,* (c) Lucy C. Vincent
Occupation (if any), Lady
Place of Abode, 28 Mornington Crescent
Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13

I, the undersigned, Thomas Engall being a (a) M. R. C. S. and being in actual practice as a (b) Surgeon hereby certify, that I, on the second day of October 1868, at (c) 28 Mornington Crescent. in the County of Middlesex separately from any other Medical Practitioner, personally examined Lucy anna Vincent of (d) 28 Mornington Crescent and that the said Lucy anna Vincent is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She was first affected with Congestion of the Brain and is now suffering from its effects. She is today in a state of semi stupor, will not speak to me and appears lost to all surrounding influences

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) by the Mother will not take food unless forced to do so I then only fluid food can be forced down. No idea of attending to the natural wants.

Signed, Name, Thos. Engall M.R.C.S.

Place of Abode, 15 Euston Square

Dated this 2nd day of October One Thousand Eight Hundred and 68

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, L. Siis Hahnemann being a (a) Registered Med. Physician and being in actual practice as a (b) hereby certify, that I, on the 3rd day of October 1868. at (c) 28 Mornington Crescent. in the County of Middlesex separately from any other Medical Practitioner, personally examined Lucy anna Vincent. of (d) 28 Mornington Crescent. and that the said Lucy anna Vincent is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.
(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) I have been with her for one hour but could not induce her to say one single word kept all the time her teeth firmly clenched and would not allow to show her tongue. Her hands were tightly clenched all the time. on making her walk. she almost fell down as she refused to walk upright. Her looks were wild she noticed nobody

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) nor anything else by her father. She fancied she had monkeys in bed and begged her father not to take her life. and talked incoherently. Attempted to get out of the window and her father had to hold her back She threatened to kill her little sister.

Signed, Name, L. Siis Hahnemann Med.

Place of Abode, 25 Duncan Terrace Islington

Dated this 3rd day of October One Thousand Eight Hundred and 68.

Pecklam House

The above is a copy of certificate of admission of Lucy Anne Vincent who is in sufficiently good health for removal

29 Feb 1872

Henry Armstrong Md

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Matthews whom I last saw at Manchester on the Twenty Third day of Third month (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Elizabeth Matthews

Signed, *Name,* Edward Matthews
Occupation (if any), Baker & Confectioner
Place of Abode, 32 Oxford Street Manchester
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this 23rd — Day of Third month —
One Thousand Eight Hundred and Seventy 2 —

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length ..... Elizabeth Matthews
Sex and Age ..... Female aged 28 years
Married, Single, or Widowed ..... Single
Condition of Life, and previous Occupation (if any) ..... Father's Assistant
Religious persuasion, as far as known ..... Society of Friends
Previous Place of Abode ..... Manchester
Whether First Attack ..... First
Age (if known) on First Attack ..... about 28 years
When and where previously under Care and Treatment ..... Nowhere
Duration of existing Attack ..... three or 4 months
Supposed Cause ..... over-exertion
Whether subject to Epilepsy ..... no
Whether Suicidal ..... no
Whether Dangerous to others ..... no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....
Name and Address of Relative to whom Notice of Death to be sent ..... Edward Matthews 32 Oxford St. Manchester

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Edwd Matthews
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Porter

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify that I, on the twenty third day of March

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) The House of John Clarke - Pocklington Rd - York

in the County of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Elizabeth Matthews Shopwoman,

of (d) 32 Oxford Street Manchester, and that

the said Elizabeth Matthews

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Appearance & Conversation. Says I am a Queen & Empress. She is in a despondent state as to her condition. Keeps looking at Keys & Pockets at right

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Porter

Place of Abode, 24 Petergate - York

Dated this twenty third day of March One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William York

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify, that I on the twenty third day of March

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) The House of John Clarke Herlington Road York

in the county of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Elizabeth Matthews

of (d) 32 Oxford Street Manchester, Shopwoman, and that

the said Elizabeth Matthews

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Her conversation is incoherent. She says that she does not know that she is visited in the night by men in women clothes. Also makes suggestive & lewd

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S W York

Place of Abode, 31 Castlegate York

Dated this 23 day of March One Thousand Eight Hundred and Seventy two.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 2nd day of March 1872, of Lucy Anna Vincent a Private Patient in Peckham House, Peckham to The Retreat, ~~House~~, York

Given under our hands this 17th day of February in the year of Our Lord One Thousand Eight Hundred and Seventy-* two

John Forster
John D Cleaton
} *Commissioners in Lunacy.*

ORDER.

I,* Lucy C. Vincent the undersigned having Authority to discharge Lucy Anna Vincent a Private Patient in Peckham House, Peckham

hereby order and direct that the said Lucy Anna Vincent be removed therefrom to The Retreat, ~~House~~, York

Given under my hand this* 22 day of February in the year of Our Lord One Thousand Eight Hundred and Seventy two.

(Signed) Lucy C. Vincent

Place of Abode 28. Mornington Crescent, London N.W.

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father:*
4. If there be no Father, then by the Patient's *Mother:*
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin:* Or by the person *who made the last payment* on the Patient's account.

* In cases of Chancery Patients—The Committee of the Person.

(1000 7 | 70—H & S 8145)

1191 Eliz.th Matthews

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

A Member by birth

2. Where was the place of birth of the patient? Adelaide South Australia

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing but always healthy

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

The disposition has always been mild & amiable but nothing peculiar

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated at home in Australia came to England when 8½ years old and sent to Croydon School for about a year then finished her education at Miss Lloyd's Birmingham

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No except that the first appearance of the present mania was perceived about ten days since

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No except as noticed in reply to question 20.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Had a severe attack of bronchitis about three years ago

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No!

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

We think it possible that her going out and getting wet feet at a particular time may have had something to do with bringing on the attack

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? In her 29th. year

15. What has been the duration of the present attack? About ten days.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? The first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing unusual observed

19. What were the first decided symptoms of mental aberration?

She appeared in low Spirits and had an apprehension that she was about to die

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She has been rather unsettled about a young man not thought suitable for her by her Parents and his name frequently during her illness

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

~~No except that~~ She was very destructive yesterday for the first time and manifested some disposition to resist violently being confined to the house.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly and orderly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In good health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Dr Matthews has attended her since the 18th inst.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

We considered it to be increasing though there have been intervals of comparative quiet, though incessantly talking and towards daylight in the morning engaged in earnest prayer for several hours

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Edward Matthews
32 Oxford St
Manchester

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Matthews

whom I last saw at 32 Oxford St. Manchester

on the twenty third day of third month 1872 (a)

a (b) as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Elizabeth Matthews

Signed, *Name,* Ann Matthews

Occupation (if any),

Place of Abode, 32 Oxford St Manchester.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this 28th Day of 3d. month

One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Elizabeth Matthews
Sex and Age	~~24th~~ years will be 29 on the 12th 6mo next.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Confectioner
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	32 Oxford St. Manchester
Whether First Attack	First
Age (if known) on First Attack	a week or ten days younger than now
When and where previously under Care and Treatment	Note previously under treatment
Duration of existing Attack	Under ten days
Supposed Cause	There are a combination of supposed causes affecting mind and body.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	There has been some appearance of this disposition when her will was talked
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	To her father Edward Matthews 32 Oxford St. Manchester

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c)

Occupation (if any),

Place of Abode, 32 Oxford St Manchester

Degree of Relationship (if any), or other circumstance of connexion with the Patient Mother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned Thomas Lowther Mathews being a (a) Graduate in Medicine of the University of Glasgow and Licentiate of the Faculty of Physicians and Surgeons Glasgow and being in actual practice as a (b) Physician hereby certify that I, on the 22nd day of March 1872 at (c) 32 Oxford Street. Chorlton upon Medlock. Manchester in the County of Lancashire separately from any other Medical Practitioner, personally examined Miss Elizabeth Matthews of (d) 32 Oxford St. Chorlton upon Medlock. Manchester and that the said Miss Elizabeth Matthews is a (e) temporily of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She frequently failed to recognise in my presence some of her most intimate and dearest friends, also stated that a branch of flowers had told her that one of her sisters had died and gone to heaven and many other incoherent statements too numerous to mention —

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Thos Lowther Mathews M.D. L.F.P.&S.
Place of Abode, 92 Oxford Street. Manchester
Dated this 23rd day of March One Thousand Eight Hundred and Seventy two. —

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, Doctor of Medicine, Dublin & Member being a (a) of the Royal College of the Royal College of Surgeons of England Physician and being in actual practice as a (b) hereby certify, that I on the 22nd day of March 1872 at (c) 32 Oxford Road. Manchester in the county of Lancaster separately from any other Medical Practitioner, personally examined Elizabeth Matthews of (d) 32 Oxford Street Manchester, and that the said Elizabeth Matthews is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) doubts about far clerical salvation - incoherence of mind as regards being watched. & not knowing certain relatives showing tendency to destructive powers. & resistance to parents not natural to her. inclined to be morose at times & reserved

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, W N Coghlan
Place of Abode, 325 Oxford Road
Dated this 23rd day of March One Thousand Eight Hundred and Seventy 2.

1192 Arthur N. Crossley

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

Member by Birthright

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Bradford

2. Where was the place of birth of the patient?

Nothing

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Good disp^n & Character & very sure in his habits

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

He left home about 20 or 21 years of age & Boarded, Reckoned Work pushing about

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Has Acted Sharpers Regular & attentive very industrious & clever

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

20 years of age & unmarried

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Fond of music & the very decided Principal of Sound Parents

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Always in comfortable circ^s & Respectably connected

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

No

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Cannot account for the Lord's sudden attack

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry William Crossley
82 Lister Terrace,
Horton Road,
Bradford.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Arthur William Crossley whom I last saw at my house at Bradford on the fifteenth day of fifth month (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Arthur William Crossley

Signed, *Name,* Henry William Crossley
Occupation (if any), Tea Dealer
Place of Abode, 82 Sisters Terrace, Morton Road, Bradford
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this Fifteenth Day of 5th month. 1872.
One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Arthur William Crossley
Sex and Age	male — aged 20
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	Tea dealer
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Bradford
Whether First Attack	first attack
Age (if known) on First Attack	20 years
When and where previously under Care and Treatment	nowhere
Duration of existing Attack	a few days
Supposed Cause	Excitement
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Henry William Crossley, Sisters Terrace, Morton Road Bradford.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Wm Crossley Bradford.
Occupation (if any), Tea dealer
Place of Abode, Bradford
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father of Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned A Kelson
being a (a) Licentiate of the College of Surgeons & Physicians. of London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the fifteenth day of May 1872
at (c) ~~Bradford~~ Wilton House 3 & 5 Little Horton Lane Bradford
in the County of York separately from any other Medical Practitioner,
personally examined Arthur William Crossley
of 82 Little Terrace Bradford Tea dealer - and that
the said Arthur William Crossley
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Shouting and screaming he constantly sings = at one time he ~~was~~ Cursing & swearing and at another praying

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) James Brocklit, states that he and another about the room & fights, tells the people about him & the then future state in life &c

Signed, *Name,* A Kelson
Place of Abode, Bradford.
Dated this 16th day of May One Thousand Eight Hundred and Seventy two

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

I, the undersigned, William Burnie,
being a (a) Doctor of Medicine of Edinburgh and a Licentiate of the ~~the~~ Royal College of Surgeons of Edinburgh,
and being in actual practice as a (b) General Practitioner of Medicine
hereby certify, that I on the fifteenth day of May, 1872 -
at (c) 82 Horton Road (Little Terrace) Bradford.
in the county of York separately from any other Medical Practitioner,
personally examined Arthur William Crossley,
of (d) 82 Horton Road - tea dealer and that
the said Arthur William Crossley,
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
(A) A turbulent and excited mind just the opposite of what is natural to him.
(B) Delusions: e.g. (1.) An idea that he has personal communication with God & with the Devil.
(2.) That he is listened to at the key-hole.
2. Other facts (if any) indicating Insanity communicated to me by others (g) Patient's family - wife & brother
An inordinate fear that when he has done ordinary things quite rightly he has done something very wrong

Signed, *Name,* William Burnie
Place of Abode, 18 Bowling St Bradford
Dated this Sixteenth day of May One Thousand Eight Hundred and Seventy two

1193 Martha Payne

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? a member by birth

2. Where was the place of birth of the patient? Northampton

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? no

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? no

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wm Payne
Arkwright St
Bolton
Lancashire

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Martha Payne

whom I last saw at Bolton

on the twenty first day of May (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Martha Payne

Signed, *Name,* Elija Jane Payne

Occupation (if any),

Place of Abode, 52 Arkwright Street Bolton

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this 21st Day of May

One Thousand Eight Hundred and Seventy 2

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Martha Payne
Sex and Age	Female aged 27 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	daughter of a Tradesman
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Bolton
Whether First Attack	Yes
Age (if known) on First Attack	About 27 years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	About six weeks
Supposed Cause	Religious Anxiety
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Payne 52 Arkwright St Bolton

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(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Elija Jane Payne

Occupation (if any),

Place of Abode, as above

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Frederic Blakesley Mallett being a (a) Licentiate of the Royal college of Surgeons Edinbro and being in actual practice as a (b) Surgeon hereby certify that I, on the 20th day of May 1872 at (c) 52 Arkwright-st Little Bolton in the County of Lancaster separately from any other Medical Practitioner, personally examined Martha Payne of (d) 52 Arkwright-st Little Bolton and that the said Martha Payne of 52 Arkwright-st Little Bolton is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) General appearance dazed manner, not answering questions, has attempted suicide

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Frederic Blakesley Mallett
Place of Abode, Silvermill House Great Bolton

Dated this 21st day of May One Thousand Eight Hundred and Seventy two

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Edward Sundeland being a (a) Member of the Royal College of Surgeons of England this Apothecaries Society of London and being in actual practice as a (b) Surgeon hereby certify, that I on the 21st day of May 1872 at (c) 52, Arkwright Street, Bolton in the county of Lancaster separately from any other Medical Practitioner, personally examined Martha Payne of (d) 52, Arkwright Street, Bolton and that the said Martha Payne is a (e) Person of Unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
It is almost impossible to get any answer from her to any question - despondency, indifference to things around her. Was called there on Sunday, because she had taken about a teaspoonful of Laudanum, and would undoubtedly have taken more had there been more in the bottle -

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Edward Sundeland
Place of Abode, 53, Higher Bridge St, Bolton

Dated this 21st day of May One Thousand Eight Hundred and Seventy two

1814 Pearson Albright

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Pearson Albright whom I last saw at Bellevue St York on the Eighth day of June 1872 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Pearson Albright

Signed, *Name,* James Wall
Occupation (if any), Not in business
Place of Abode, The Hills Sheffield
Degree of Relationship (if any), or other circumstances of connexion with the Patient Elder of the Society of Friends

Dated this 8th Day of June 1872
One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Pearson Albright
Sex and Age	Male aged 17 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Grocer
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Hoonefirth
Whether First Attack	Yes first
Age (if known) on First Attack	aged 17
When and where previously under Care and Treatment	no where
Duration of existing Attack	6 weeks
Supposed Cause	no cause known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Isaac Milner Eyre Lane Sheffield

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Wall
Occupation (if any),
Place of Abode, The Hills Sheffield
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Procter

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify that I, on the eighth day of June

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) 108 - Bootham York

in the County of York separately from any other Medical Practitioner,

personally examined Pearson Albright - Grocer

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Huntington Farmer and that

the said Pearson Albright

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Insane person and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) - He is feeble & weak in his intellect - will carry on conversations - appreciates with difficulty all questions asked him

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) he tells me he will get up at night & sit moodily & muttered to his self when

Signed, Name, William Procter

Place of Abode, 14 Petergate - York

Dated this eighth day of June One Thousand Eight Hundred and Seventy two

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify, that I on the eighth day of June 1872

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) 108 Bootham Street York

in the county of York separately from any other Medical Practitioner,

personally examined Pearson albright

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Huntington Farmer and that

the said Pearson Albright

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) He looks vacant. I give no rational answer to my questions says he has been away. but cannot tell me where to & from

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, J. W. North

Place of Abode, 31 Castlegate York

Dated this 8th day of June One Thousand Eight Hundred and Seventy two.

1195 Jane Cooper

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Particularly kind in disposition No No No

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
No -

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Domestic Servant from Early Youth - industrious temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Married when 25 years of age - One son still living

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Had an attack of Paralysis 18. months ago

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
Bronchitis & Dropsy - Femoral. Hernia

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
Confined to the House from bad state of health after leading a very active life in her business - never recovered the attack of Paralysis

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 59 Years.

15. What has been the duration of the present attack? 18 Months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?
First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Always in good Spirits 20 - Very little sleep.

19. What were the first decided symptoms of mental aberration?
Religious delusions

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
under the delusion that He has committed some unpardonable Sin.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?
No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Attempted to commit Suicide frequently —

23. What are the habits of the patient as regards personal cleanliness and decorum?
Cleanly in her habits

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
No Chronic Bronchitis

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
No

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c 96, & 25 26 Vict c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Cooper,

whom I last saw at Bramley

on the 14 day of 6mo 1872 (a)

a (b) person of unsound mind a Patient in your House.

Subjoined is a Statement respecting the said Jane Cooper

Signed, *Name,* ~~Jane Cooper~~ John Cooper

Occupation (if any), Draper

Place of Abode, Bramley

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this ~~Fourteenth~~ Day of 6th month

One Thousand Eight Hundred and Seventy Two

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Jane Cooper
Sex and Age	Female — Sixty
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Bramley
Whether First Attack	First
Age (if known) on First Attack	60
When and where previously under Care and Treatment	No where
Duration of existing Attack	Eighteen months
Supposed Cause	Ill health
Whether subject to Epilepsy	No
Whether Suicidal	Suicidal
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	-
Name and Address of Relative to whom Notice of Death to be sent	John Cooper - Bramley

Signed, *Name,* (c) John Cooper

Occupation (if any), Draper

Place of Abode, Bramley

Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Henry Wm Coleman being a (a) Member of Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the Eleventh day of June 1872 at (c) Town Street Bramley in the County of York separately from any other Medical Practitioner, personally examined Jane Cooper Town Street Bramley Married woman and that of (d) Town Street Bramley Jane Cooper the said is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She is in a State of great restlessness not like ordinary Somnolent excitement in her conversation - States that she has committed some great sin for which God will never grant forgiveness - Says she is obliged to leave the house instead of staying to work in fields she is drawn against herself, she has attempted suicide - Both her pulse are - Both her pupils dilated - Internal mark of having attempted suicide.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) by her Husband That she has made several attempts to Commit Suicide

Signed, Name, Henry W Coleman
Place of Abode, Bramley Nr Leeds

Dated this 12th day of June One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles Slesser being a (a) Doctor of Medicine and Licentiate of the R. Coll. of Surgeons Edinburgh and being in actual practice as a (b) general medical practitioner hereby certify, that I on the eleventh day of June at (c) Bramley, Town St in the county of York separately from any other Medical Practitioner, personally examined Jane Cooper, Town Street, Bramley of (d) a married woman and that the said Jane Cooper is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) - Great restlessness and sleeplessness, She keeps constantly explaining that she is no longer a member that the devil has got hold of her, that she is to be torn in pieces by the devil on earth and can't be saved - Confesses that she has tried to commit suicide of which the marks are visible - one wound having been inflicted on the day of my examination

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her husband states that she has made repeated attempts on her life by wounds and also by swallowing at once a whole box of pills one of which had been ordered for her nightly

Signed, Name, Charles Slesser
Place of Abode, Bramley. White Gab House

Dated this 12th day of June One Thousand Eight Hundred and Seventy Two.

1196 Margaret McNish

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She attends Meeting. her Husband a Member of the Society by Convincement

2. Where was the place of birth of the patient? Barony Parish Glasgow.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? always of a quiet disposition.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? A Common Course of Instruction in the Parish School. with Needle work & Music privately

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Trained to Household duties. Never from Home. Never but had Some sort of work on hand. She was early brought under the powers of Religion. and has always lived accordingly

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married when Thirty years of age. Three Children. Jane aged. Eight years & 6 Months. George. Four years & Som. Three years.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? We have Lost in Business, but not to the extent She imagines.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Never

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? A Brother of her Father and also a Brother of her Mother. & one Aunt her Mother. Suffered much from depression of Spirits. I am afraid Her Knowledge of the above facts. never had an effect upon her

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? In 9th Month 71. News of the Hurricane & Earthquake that Swept over the Leeward Islands Came to Glasgow. Was in Attacks at the Time. It was nearly four weeks before She heard that Twas well During said Time. She Suffered much. She was well and in Good Heart Until at end of 2nd Month She had a severe Cold. and began to be Nervous In 4th Month the Youngest had Hooping Cough. and the Eldest was Complaining of Cold. She then began to Mourn that Wife Dead. and that it was from her they took their Trouble

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? Fortyone

15. What has been the duration of the present attack? From Eight to Ten weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? Eight weeks ago she went nearly a Mile at 5 o'clock Am. and told her Father that Leon was dead. Two weeks before that she walked four miles to My Brothers at 4 am. and Complained that she could not sleep. and that a dark Cloud was settled over where she

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
She often asks What is the use of eating, as her time is finished.

23. What are the habits of the patient as regards personal cleanliness and decorum? very particular as to personal cleanliness

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. In good Health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Never

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Her friends would do nothing. Her friends of Glasgow Meeting would do nothing. Leon's Sister had her Father, & they Telegraphed for Me to come Home. I came away on Friday afternoon, after seeing Change was going on. But she left Glasgow on the Monday Following. Out at work. but was Low. Nothing to the Extreme.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
The sight of Myself or the Children appear to make her much worse. There are Times when she is very quiet and in a minute she is up and wringing her hands and crying out

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Mc Mish.
6 Albert Drive Crosshill Glasgow

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Margaret Mc Nish whom I last saw at York - on the Twenty second day of Sixth Month (a) a (b) Person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Margaret Mc Nish

Signed, *Name,* James Mc Nish
Occupation (if any), Mill Manager
Place of Abode, 5 Albert Drive Crosshill Glasgow
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this Twenty second Day of Sixth Month
One Thousand Eight Hundred and Seventy Two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Margaret Mc Nish. Maiden Name Bridie
Sex and Age	Female. Forty one years and two months
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Tradesmans wife.
Religious persuasion, as far as known	Friend
Previous Place of Abode	5 Albert Drive Crosshill Glasgow Scotland
Whether First Attack	First
Age (if known) on First Attack	About 41 -
When and where previously under Care and Treatment	Nowhere -
Duration of existing Attack	From Eight to Ten weeks
Supposed Cause	Cannot tell
Whether subject to Epilepsy	No
Whether Suicidal	Left the House, but came back saying she could Not drown herself.
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	James Mc Nish. care of Wm Smeal 36 Monteath Row, Glasgow

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Mc Nish
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel Cockburn

being a (a) Doctor of Medicine and Licentiate of the Royal College of Surgeons Edin.

and being in actual practice as a (b) Physician

hereby certify that I, on the 12th day of June 1872

at (c) No 5 Albert Drive. Victoria Road.

in the County of Lanark separately from any other Medical Practitioner,

personally examined Margaret McNish

of (d) and that

the said Margaret McNish

is a (e) Person of Unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She labours under the delusion that she and the children are the subjects of some foul and deadly disease - and threatens Self destruction - She takes no interest in household affairs - but sits wringing her hands and bemoaning her condition - She also refuses to take food -

2. Other facts (if any) indicating Insanity communicated to me by others (g) She labours under the delusion that she is in absolute poverty and must die from want.

Signed, *Name,* Samuel Cockburn M.D

Place of Abode, 173 North St Glasgow

Dated this 19th day of June One Thousand Eight Hundred and Seventy two

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, John Steel

being a (a) Licentiate of the Faculty of Physicians and Surgeons of Glasgow

and being in actual practice as a (b) general Practitioner

hereby certify, that I on the 15th day of June

at (c) No 2 Stanley Terrace, Shawlands

in the county of Renfrew separately from any other Medical Practitioner,

personally examined Margaret Mc Nish

of (d) 5 Albert Drive Govanhill and that

the said Margaret Mc Nish

is a (e) a person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) She imagines that she and her family have contracted a disease which is in the blood and which they will never get the better of — that they will die soon

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her husband says that she supposes that she is in abject poverty and refuses to take food

Signed, *Name,* John Steel Surgeon

Place of Abode, Pollokshaws

Dated this 16th day of June One Thousand Eight Hundred and Seventy two

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

1897 Florence E. Smith

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Florence Dorothy Smith whom I last saw at 13 Bell Vue N. York on the eighth day of July 1872 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Florence Dorothy Smith

Signed, *Name,* Mary B Mason

Occupation (if any), —

Place of Abode, Heslington Rd York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister of the Friends Meeting

Dated this eighth Day of July One Thousand Eight Hundred and Seventy two.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length ..... Florence Dorothy Smith

Sex and Age ..... Female 20 years

Married, Single, or Widowed ..... Single

Condition of Life, and previous Occupation (if any) ..... Governess

Religious persuasion, as far as known ..... Member of the Society of Friends

Previous Place of Abode ..... 13 Bell Vue East York.

Whether First Attack ..... Not the first

Age (if known) on First Attack ..... 14 years.

When and where previously under Care and Treatment .... at the Retreat. York in 1866 + also 1871-72.

Duration of existing Attack ..... two or three days

Supposed Cause ..... unknown

Whether subject to Epilepsy ..... Not

Whether Suicidal ..... Not

Whether Dangerous to others ..... Not

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... Not

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners ..... —

Name and Address of Relative to whom Notice of Death to be sent ..... Barron Smith Rockery Essex.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Mary B Mason

Occupation (if any), —

Place of Abode, —

Degree of Relationship (if any), or other circumstance of connexion with the Patient —

4-71

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the eighth day of July 1872
at (c) 13 Belle Vue Street Heslington Road York
in the County of York separately from any other Medical Practitioner,
personally examined Florence Dorothy Smith a prisoner
of (d) 13 Belle Vue Street York - Single woman and that
the said Florence Dorothy Smith
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Rambling incoherent conversation

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North
Place of Abode, 31 Carthagena York
Dated this 8th day of July One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the eighth day of July
at (c) No 13 Belle Vue St. - York
in the county of York separately from any other Medical Practitioner,
personally examined Florence Dorothy Smith - Governess
of (d) 13 Belle Vue St. York - Single woman and that
the said Florence Dorothy Smith
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is irrational & unconnected in her conversation - says she is Queen of Bantham - says that her sleep is disturbed by disaffected Lancastrian schismatics

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Procter
Place of Abode, 24 Petergate York
Dated this eighth day of July One Thousand Eight Hundred and Seventy ~~one~~ two

1198 Isabel Benington

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?
In membership from Birth

2. Where was the place of birth of the patient?
Holderness, Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
None

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
I am not aware of any thing special but believe she was a bright & promising girl.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
She was a Scholar at Ackworth & to much satisfaction

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
She was at one time with her mother in a retail business – her conduct that of a temperate & respectable person.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
She is a single woman

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
I know of nothing to report here

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
I believe not.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
A cousin was insane many years since

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
This first attack appears to be an accession & development of some long standing eccentricity

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

She is Sixty years old

15. What has been the duration of the present attack?

About two months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first decided attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

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18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

I believe she has slept poorly for some time but no great change has been observable

19. What were the first decided symptoms of mental aberration?

Near two months since she left her lodging in the country under the idea of having had a vision & wandered to a distance stating she had laid all at the apostles feet

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

For some days past the idea has been uppermost that the Daily News & other papers were publishing allegorical accounts of her ways & words.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

None

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No, except that sometimes she declined to eat sufficiently without being urged.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good tho not very exact as to order & tidiness of late

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Nothing to remark

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing recently

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

William Ketchling
of Wakefield
for the present

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Isabel Benington whom I last saw at Wakefield on the 24th day of Eighth month 1872 (a) as a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Isabel Benington Isabel Benington

Signed, Name, William Kitching

Occupation (if any),

Place of Abode, Northgate, Wakefield

Degree of Relationship (if any), or other circumstances of connexion with the Patient } The Patients Sister's Husband

Dated this twenty fourth Day of the eighth month

One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Isabel Benington
Sex and Age	Female — 60 Years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No employment of late years
Religious persuasion, as far as known	A Friend
Previous Place of Abode	Wakefield & until lately Wragby near Wakefield.
Whether First Attack	First.
Age (if known) on First Attack	60 years.
When and where previously under Care and Treatment	Not [illegible] Nowhere.
Duration of existing Attack	A few weeks
Supposed Cause	Not ascertained.
Whether subject to Epilepsy	No
Whether Suicidal	No No evidence to be offered tho she spoke once lately of jumping into the river.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Kitching, Wakefield.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) William Kitching

Occupation (if any),

Place of Abode, Wakefield

Degree of Relationship (if any), or other circumstance of connexion with the Patient } The Patients Sisters husband

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

The house has no number.

X [illegible]

I, the undersigned Thomas G. Wright
being a (a) ~~Physician~~ Member of the College of Physicians in London
and being in actual practice as a (b) Physician
hereby certify that I, on the 24th day of August
at (c) Northgate in Wakefield
in the County of York separately from any other Medical Practitioner,
personally examined Miss Isabel Bennington
of (d) Wakefield and that
the said Isabel Bennington
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) — morbidly loquacious and suspicious of all around her — rambles on in a rapid succession of delusive ideas with little coherence, chiefly referring to imaginary accusations against herself in newspapers, — and unjust treatment by friends.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) — Her brother in law× informs me she imagines the newspapers refer to her having murdered a child — that they say men were seen in her room and that she is about to be confined — with various other delusions.

× William Hitching

Signed, Name, Tg Wright M.D. MRC (Lond)
Place of Abode, Wakefield
Dated this 24 day of August One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

The house has no number

I, the undersigned, Thomas Walker
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty fourth day of August 1872
at (c)× Northgate in Wakefield
in the county of York separately from any other Medical Practitioner,
personally examined Miss Isabel Bennington (Spinster)
of (d) Wentworth Terrace - Wakefield and that
the said Isabel Bennington
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Says there are spies listening to all she says & putting it in the newspapers - also she tells me they say, she has murdered a child by cutting its throat and various other delusions

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mr. William Hitching informs me that all newspapers reports she thinks refer to her - & the fish in the Brighton aquarium are in someway connected with her

Signed, Name, Thomas Walker
Place of Abode, The Elms, Wakefield
Dated this 24th day of August One Thousand Eight Hundred and Seventy two

1199 Esther Dodsworth

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? no

2. Where was the place of birth of the patient? Haydon Bridge, Northumberland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
since birth, she has always been of a peculiar mental constitution early in life manifesting hysteria

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
generally healthy - intractable - also highly imaginative
she was a precocious child - she is precical to comparison

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
the affections were cultivated - but she had only an ordinary education - she went to a private mixed school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
she was taught dress making - she was very industrious very temperate - and conduct moral in every way

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? - she has never engaged in any intellectual pursuit - she has no particular bias

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
she has had some matrimonial disappointment

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
none but hysteria

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
none

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
there is no hereditary tendency

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
mental depression from disappointment, succeeded by cessation of menstrual periods seem to be basis of this continued attack

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? at 30

15. What has been the duration of the present attack? since Feby 1872

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was nothing peculiar observed

19. What were the first decided symptoms of mental aberration?

Hysteria

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Dislike of her relations, and others - Loss of activity and industry She will sit on a chair and rock for 2 hours at a time - She made great noises when opposed

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She has no tendency to self destruction - She is not violent

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She will not take her food -

23. What are the habits of the patient as regards personal cleanliness and decorum?

She is cleanly - and decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is not in good health inasmuch as she has irregular periods, and disordered mental manifestations

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has never been in charge before

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

She has been under constant Medical attendance with little benefit

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

She seems somewhat better & she is now unwell The disease is regular - not in fits, and remissions - She nurses food

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Cuthbert Ainsworth
Wrayton Bridge
Northumberland

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Esther Dodsworth

whom I last saw at Malton on the Second day of September (a)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (b) Lunatic as a Patient in your House.

Subjoined is a statement respecting the said Esther Dodsworth

Signed, *Name,* — Cuthbert Dodsworth

Occupation (if any), Mech. Engineer

Place of Abode, Haydon Bridge Northumberland

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Second Day of September

One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Esther Dodsworth
Sex and Age	30 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Milliner and Dressmaker
Religious persuasion, as far as known	Protestant established Church
Previous Place of Abode	Haydon Bridge
Whether First Attack	First attack
Age (if known) on First Attack	30
When and where previously under Care and Treatment	~~Newcastle~~ Nowhere
Duration of existing Attack	Since Feb 1872
Supposed Cause	Hysteria
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Found Lunatic by 2 Medical Men
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Cuthbert Dodsworth Haydon Bridge

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Cuthbert Dodsworth

Occupation (if any), Mech. Engineer

Place of Abode, Haydon Bridge

Degree of Relationship (if any), or other circumstance of connexion with the Patient Father

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Joshua Hartley of Malton

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons and Licentiate of Apothecaries

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) general practitioner

hereby certify that I, on the second day of September 1872

(c) Insert the street and number of the house (if any), or other like particulars.

at (c) Malton - at Beech Grove

in the County of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Esther Dodsworth

of (d) New Malton formerly Hayden Bridge - Northumberland and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Esther Dodsworth

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

She refuses food - she is silent - does not reply to questions - she seems rather passive than active - she is abstracted in her ideas —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her father tells me that she was violent under deprivation - hates great noise - that she dislikes her relations intensely and that her character is changed - that she refuses food

Signed, Name, Joshua Hartley - MRCP L S A

Place of Abode, Malton

Dated this second day of September One Thousand Eight Hundred and Seventy 2.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Taylor Colby of Malton

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons & Licentiate of Apothecaries Society

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) General practitioner

hereby certify, that I on the second day of September 1872

(c) Insert the street and number of the house (if any), or other like particulars.

at (c) Beech Grove. Malton

in the county of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Esther Dodsworth

of (d) New Malton, formerly Hayden Bridge, Northumberland and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Esther Dodsworth

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

She refuses food - the fact in my opinion renders the case one for immediate attention.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) for Father states she refuses food: was violent at the commencement of her illness; has a very great dislike to her sister.

Signed, Name, Wm Taylor Colby M.R.C.S.L.S.A.

Place of Abode, Malton

Dated this second day of September One Thousand Eight Hundred and Seventy two

1200 S M Hodgson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Marshall Hodgson whom I last saw at Rotherham on the Fourteenth day of September (a) a (b) Person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Sarah Marshal Hodgson

Signed, *Name,* James Hodgson
Occupation (if any), Iron Miller
Place of Abode, Rotherham
Degree of Relationship (if any), or other circumstances of connexion with the Patient Son

Dated this 14th Day of September
One Thousand Eight Hundred and Seventy Two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Marshall Hodgson
Sex and Age	Female Age Seventy One
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious persuasion, as far as known	Wesleyan
Previous Place of Abode	Rotherham
Whether First Attack	No
Age (if known) on First Attack	Not known
When and where previously under Care and Treatment	At the Retreat at York
Duration of existing Attack	Three months
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	Doubtful
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	No
Name and Address of Relative to whom Notice of Death to be sent	James Hodgson Rotherham

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) James Hodgson
Occupation (if any), Miller
Place of Abode, West End Rotherham
Degree of Relationship (if any), or other circumstance of connexion with the Patient Son

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned James Crowther being a (a) Licentiate of the Apothecaries Company and being in actual practice as a (b) apothecary at Rotherham hereby certify that I, on the thirteenth day of September 1872 at (c) Moorgate Grove Rotherham in the County of York separately from any other Medical Practitioner, personally examined Mrs Sarah Marshall Hodgson of (d) Moorgate Grove (a widow Lady) and that the said Sarah Marshall Hodgson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) General appearance of the Countenance — She declared she had ruined her family & especially her son whose mill she stopped working & that his family had nothing to eat & that she was a great hypocrite ruined in this world & lost for ever

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) She got up in the middle of the night & inspected a kind of medicine chest in search of Laudanum with a suicidal intent communicated to me by Mrs Hodgson who slept with her

Signed, *Name,* James Crowther
Place of Abode, 21 Crofts Rotherham

Dated this 14 day of September One Thousand Eight Hundred and Seventy Two

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Samuel Parker Fellow of the Royal being a (a) of Surgeons England & Licentiate of the Apothecaries Co and being in actual practice as a (b) Surgeon hereby certify, that I on the Sixteenth day of September 1872 at (c) Moorgate Grove Rotherham in the county of York separately from any other Medical Practitioner, personally examined × Mrs Sarah Marshall Hodgson (a widow Lady) of (d) Moorgate Grove Rotherham and that the said Mrs Sarah Marshall Hodgson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is restless, unsettled, says that she has deceived her friends, that she has brought them to ruin. that she is a lost sinner — and a very great Hypocrite — these are delusions

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr Crowther her medical attendants informs me that she has attempted to take poison in the night.

Signed, *Name,* Samuel Parker
Place of Abode, 24 George St Sheffield

Dated this 14th day of Septr One Thousand Eight Hundred and Seventy 2

1201. Sarah Atkinson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She is a Member by Birthright

2. Where was the place of birth of the patient? Stockton on Tee

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Quiet and Amiable.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Industrious and Kept a Day School

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
nothing particular has been observed.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
Her mind has been much troubled with the removal of her Sister to the Retreat and the prospect of her means of support being exhausted

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No,

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
She has been many years in delicate health and has been afflicted with Asthma

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
Her Father was once in the Retreat and her Sister is now in the Retreat.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
Anxiety is the apparent cause of this attack

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

66 years.

15. What has been the duration of the present attack?

3 Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing was observed.

19. What were the first decided symptoms of mental aberration?

Extreme parsimony and would hardly herself and those about her sufficient of the necessaries of life.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She has passed her time in wandering about, examining her boxes and drawers and on several occasions attempted to destroy herself

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She has several times attempted to strangle herself.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is delicate and Asthmatical

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She has not been under previous care

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

I

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Sarah Mason. Castle Gate, York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Atkinson

whom I last saw at 20 Bell Vue Street York

on the 26th day of 9 Month 1872 (a)

a (b) Person of Unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Sarah Atkinson

Signed, *Name,* Elijah M. Goundry

Occupation (if any), Single Housekeeper to a Gentleman

Place of Abode, Wakefield, 6 Cliff Parade.

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousins Daughter

Dated this 26th Day of 9 Month 1872

One Thousand Eight Hundred and Seventy 2.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Atkinson
Sex and Age	Female 67 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Spinster. Teacher.
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Stockton on Tees
Whether First Attack	First Attack
Age (if known) on First Attack	Was 67 years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	3 Months
Supposed Cause	Anxiety
Whether subject to Epilepsy	No
Whether Suicidal	Yes Not
Whether Dangerous to others	
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sarah Mason, Castle Gate, York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) James Mason

Occupation (if any), Farmer

Place of Abode, Fleshington Road, Yorks

Degree of Relationship (if any), or other circumstance of connexion with the Patient Cousin

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Isaac Menuell Williams
being a (a) M. R. C. S. Eng.
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Twentieth day of September
at (c) 20 Belle Vue St, Heslington Road
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Atkinson, Spinster
of (d) 20 Belle Vue St, Heslington Road and that
the said Sarah Atkinson
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

She is at times very excited and at others depressed. In my presence she attempted to choke herself.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Alice Thompson, who has been with her for some time past states that she has had great difficulty in preventing her destroying herself.

Signed, Name, Is. Menuell Williams
Place of Abode, 48 Micklegate, York

Dated this twentieth day of September One Thousand Eight Hundred and Seventy two

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twentieth day of September 1872
at (c) 20 Belle Vue Street - Heslington Road York
in the county of York separately from any other Medical Practitioner,
personally examined Sarah Atkinson
of (d) 20 Belle Vue Street - Spinster and that
the said Sarah Atkinson
is a (e) lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Depression of spirits - a desire to destroy herself

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Alice Thompson informs me that she has for some time past been with her & has attempted to destroy herself

Signed, Name, J. W. North
Place of Abode, 15 Castlegate York

Dated this 20th day of September One Thousand Eight Hundred and Seventy two

1202. Caroline Sams

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Yes

2. Where was the place of birth of the patient? Thornbury, Gloucestershire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? generally deficient

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? She has never shown any intellectual power

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The affections have been cultivated by home life - incapable of instruction.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. No occupation -

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

No

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Not known

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? from birth

15. What has been the duration of the present attack? from birth

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The patient is purely idiotic

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

cleanly & decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. at Earlswood for One Year

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Earlswood but with little effect

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary –

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Sophia Elizabeth Sams – 7 Woodhill – Portishead Somerset

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Caroline Lucy Sams

whom I last saw at Portishead Somerset

on the 28th day of October (a)

a (b) Idiot as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Caroline Lucy Sams

Signed, *Name,* Sophia Elizabeth Sams

Occupation (if any), Widow

Place of Abode, 7 Woodhill Portishead Somerset

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

Dated this 28th Day of October

One Thousand Eight Hundred and Seventy 2

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Caroline Lucy Sams
Sex and Age	Female 14 years
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	at home with Mother
Religious persuasion, as far as known	A Member of the Society of Friends
Previous Place of Abode	Portishead Somerset
Whether First Attack	Yes
Age (if known) on First Attack	From Birth
When and where previously under Care and Treatment	at Earlswood from May 1869 to May 70
Duration of existing Attack	from Birth
Supposed Cause	Congenital deficiency of Brain
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Sophia Elizabeth Sams No 7 Woodhill Portishead Somerset.

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Sophia Elizabeth Sams — Widow

Occupation (if any), 7 Woodhill Portishead

Place of Abode, Somerset

Degree of Relationship (if any), or other circumstance of connexion with the Patient Mother

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned being a (a) Bachelor of Medicine, & Member of the Royal College of Surgeons and being in actual practice as a (b) Physician & Surgeon hereby certify that I, on the 22nd day of Oct. 1872 at (c) Park View House, Inverford, Calne in the County of Wilts separately from any other Medical Practitioner, personally examined Caroline Lucy Sams of (d) Portishead Bristol and that the said Caroline Lucy Sams is a (e) Idiot and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Her general manner appearance & manners, she has a vacant look, is continually turning hastily about, is unable to answer rationally even simple questions, or to fix her attention on any subjects.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) is unable to apply herself to any subjects of education or to learn to do any useful work, and on being opposed in the slightest way, she flys into a violent passion. Information given by Miss E. Rodman under whose care she has been placed of late.

Signed, Name, Francis H. Rodman
Place of Abode, 27 Long St. Devizes, Wilts.
Dated this 24th day of Oct. One Thousand Eight Hundred and Seventy Two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, being a (a) Member of the Royal College of Surgeons of London and Licentiate of the Apothecaries Company and being in actual practice as a (b) Surgeon hereby certify, that I on the 28th day of October 1872. at (c) No 7 Portishead in the county of Somerset separately from any other Medical Practitioner, personally examined Caroline Lucy Sams of (d) Portishead Somerset. and that the said Caroline Lucy Sams is a (e) Idiot and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Incoherence in conversation, incapacity of following up an idea deficiency of speech, easily excited & depressed and quite incapable of taking care of herself out of doors.

(g) Here state the information, and from whom.

Sophia Sams by Mother

2. Other facts (if any) indicating Insanity communicated to me by others (g) great difficulty in keeping her occupied with any amusement and unable to dress herself properly

Signed, Name, Frederick Watkins
Place of Abode, Hillside Portishead
Dated this 28 day of October One Thousand Eight Hundred and Seventy Two.

1263 Michael Morrall

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? full member

2. Where was the place of birth of the patient? Studley Warwickshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? none

4. What appeared to be the disposition and character during the youth of the patient; were those marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? none

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Very limited

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Needle Making well conducted

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at 30 not any

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? reverses and some disappointments

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? fits twice

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Generally healthy

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? none what ever

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? not known

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 54.

15. What has been the duration of the present attack? one week

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? none

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. none

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? None whatever

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? no

23. What are the habits of the patient as regards personal cleanliness and decorum? very good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. ~~very good~~ health appears good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. never

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? none

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? not known

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? Martha Harrell

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Michael Morrall

whom I last saw at Matlock

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the Lunatic 13th day of November 1872 (a)

a (b) as a Patient in your House.

Subjoined is a statement respecting the said Michael Morrall

Signed, Name, * ~~Michael Morrall~~ Martha Morrall

Occupation (if any), none

Place of Abode, Matlock Derbyshire

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Wife

Dated this 11th Day of November

One Thousand Eight Hundred and Seventy 2

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

* The wrong name signed & altered to Martha Morrall

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length ..... Michael Morrall

Sex and Age ..... 54 ..... Male Aged 54

Married, Single, or Widowed ..... Married

Condition of Life, and previous Occupation (if any) ..... Merchant

Religious persuasion, as far as known ..... Member of Society of Friends

Previous Place of Abode ..... Manchester

Whether First Attack ..... yes

Age (if known) on First Attack 54

When and where previously under Care and Treatment .... no ware

Duration of existing Attack .... one week ....

Supposed Cause ..... not known .....

Whether subject to Epilepsy ..... yes

Whether Suicidal ..... no .....

Whether Dangerous to others No .....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ..... } no

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners ..... }

Name and Address of Relative to whom Notice of Death to be sent ..... } Martha Morrall Matlock Bridge

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) Martha Morrall

Occupation (if any),

Place of Abode, Matlock Bank

Degree of Relationship (if any), or other circumstance of connexion with the Patient } * Wife of Michael Morrall

* Degree of relationship is left out

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Josiah Cash; being a Licentiate of the Royal College of Physicians Edinburgh; and Member of the Royal College of Surgeons London

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

and being in actual practice as a (b) Surgeon
hereby certify that I, on the Thirteenth day of November 1872
at (c) Matlock Bank
in the County of Derby separately from any other Medical Practitioner,
personally examined Michael Morrell.
of (d) Matlock Bank now out of Business & Retired and that
the said Michael Morrell,
is a (e) person of unsound mind, and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

1st I found him in a very wild and excited state.
2nd He told me there was a Gipsey in the house trying to take his life with a fork.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

I was informed by John O'Donald that he takes off his clothes, and runs about without any
2nd He says that he is possessed with superhuman power,

Signed, Name, Josiah Cash.
Place of Abode, Bridge House, Matlock, Derbyshire
Dated this Thirteenth day of November One Thousand Eight Hundred and Seventy Two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Robert C. B. Holland being a member of

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

being a (a) Royal College of Surgeons & Doctor of Medicine of University of St Andrews Physician & Surgeon
and being in actual practice as a (b)
hereby certify, that I on the fourteenth day of November 1872
at (c) Balmoral House Matlock Bank
in the county of Derby separately from any other Medical Practitioner,
personally examined Mr Michael Morrall
of (d) Matlock Bank * now out of business & retired and that
the said Mr Michael Morrall
is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

1 Extremely violent & boisterous in manner
2 Thought he was going to be King of England & conversed irrationally - using wild gesticulation.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

From Job Smith his attendant — That the house is haunted & that he is Michael the Archangel

Signed, Name, Robt C. B. Holland
Place of Abode, Dale House Matlock Derbyshire
Dated this fourteenth day of November One Thousand Eight Hundred and Seventy Two

1204. W. Fieldens

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Fieldsend

whom I last saw at 13 Belle Vue Street York

on the fifth day of December (a) 1872

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Fieldsend

Signed, *Name,* John Fieldsend

Occupation (if any), Farmer

Place of Abode, Tong at Rake Farm

Degree of Relationship (if any) or other circumstances of connexion with the Patient Brother

Dated this fifth Day of ~~Nov.~~ December 1872

One Thousand Eight Hundred and Seventy 2

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	William Fieldsend
Sex and Age	Male 42
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Cashier
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Grange Street Little Horton Lane Bradford
Whether First Attack	first
Age (if known) on First Attack	42 years
When and where previously under Care and Treatment	nowhere
Duration of existing Attack	four weeks
Supposed Cause	Ill Health & over Work
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	John Fieldsend Farmer 7 Holme Lane Bradford

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Fieldsend

Occupation (if any), Farmer

Place of Abode, Rake Farm Tong

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Pickard Licensed
being a (a) Member of the College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the fifth day of December
at (c) 15 Bellegate - York
in the County of York separately from any other Medical Practitioner,
personally examined William Fildyard - Clerk
of (d) Grange Street Bradford and that
the said William Fildyard
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) He is moody & melancholic - answers all questions with difficulty & is somewhat incoherent

2. Other facts (if any) indicating Insanity communicated to me by others (g) I am informed by his brother that he fancies (with out truth foundation) that he has ruined his family

Signed, Name, William Pickard
Place of Abode, 14 Petergate - York
Dated this fifth day of December One Thousand Eight
Hundred and Seventy two

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the fifth day of December 1872
at (c) 13 Bellegate Street York
in the county of York separately from any other Medical Practitioner,
personally examined William Fildyard
of (d) Grange Street Bradford - Yorkshire and that
the said William Fildyard
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Great depression of spirits - he never answers a question fully - has a melancholy & dejected expression - & does not answer me when I talk him the spirit of my visit from William Fildyard.

2. Other facts (if any) indicating Insanity communicated to me by others (g) His brother says that he believes he has ruined his family - which is not true

Signed, Name, S W North
Place of Abode, Castlegate York
Dated this 5th day of December One Thousand Eight
Hundred and Seventy two.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? An attender of Friends Meetings

2. Where was the place of birth of the patient? Hull

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Studious, Kind, Quick in intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Received a good Education at Rawdon & was a Teacher at Ayton.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. As a Clerk, Teetotaller all his life, & very industrious & Steady

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at 36, One Child 5 years old

8. Has the patient, at any time, engaged in any intellectual, or other pursuits with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? A very good Chess Player

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Failed in Business abt 5 years ago caused him great anxiety

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Has always had good bodily Health

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Over Work & anxiety on account of his Health

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 42

15. What has been the duration of the present attack? 3 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

/

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

for the last 2 months he has been depressed in spirits, & has suffered from loss of sleep

19. What were the first decided symptoms of mental aberration?

Brooded very much over an affection of the heart & thought he was in pecuniary difficulties

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He believes his mind is worked out & his delusions relate to his health & circumstances

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Sometimes refused food during the last 3 weeks

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

has had an affection of the heart

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Nowhere

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Has been attended by his medical advisers with no benefit to his mind

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Better than he has been, has lucid intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Elizabeth Fieldsend, Greaves Street Little Horton Lane Bradford

or; forwarded to Fieldsend Brothers Fawcett Court Bradford

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Fieldsend whom I last saw at my House Raike Farm Tong on the 27 day of Eleventh Month (a) 1872 a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Fieldsend

Signed, *Name,* John Fieldsend
Occupation (if any), Farmer
Place of Abode, Raike Farm Tong
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 27th Day of Eleventh Month
One Thousand Eight Hundred and Seventy two

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	~~Wm~~ William Fieldsend
Sex and Age	Male Forty-two years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Cashier
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Great Strat Little Horton Lane Bradford
Whether First Attack	First
Age (if known) on First Attack	42 years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Three Weeks
Supposed Cause	Ill Health & over work
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	John Fieldsend Farmer, Holme Lane Nr Bradford

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Fieldsend
Occupation (if any), Farmer
Place of Abode, Tong
Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Edward Bowser

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons (Edin.) &c.

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the fifteenth day of November

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) Greaves street, Little Horton (Bradford)

in the County of York separately from any other Medical Practitioner,

personally examined by William Fieldsend

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Greaves street, Little Horton, Cashier and that

(e) Lunatic, or an Idiot, or a person of unsound mind.

the said William Fieldsend

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Believes that he and wrong stomach or intestines, and although eating but few skillys will come to vigorous to his legs readily yawned for which he says he is very faint. Has to be assisted upon & off bed upon being ready, therefore eventually refuses taking such skillys &c

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His wife and others state that he is capable altered in his mind, is restless, cant sleep, constantly looking over his shoulder as though afraid of his employer, Talloway from whom he greatest kindness to him he actually dyspepsia.

Signed,

Name, Edward Bowser

Place of Abode, 22 Manor Row Bradford

Dated this 26th day of November One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Hill Evans

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Licentiate of the Royal College of Surgeons of Ireland & Doctor of Medicine of the University of Dublin

and being in actual practice as a (b) Surgeon & Physician

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the twenty fourth day of November (1872)

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Holme Lane, Undley Hill near Bradford

in the county of York separately from any other Medical Practitioner,

personally examined William Fildsend

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Greaves St. Bradford - Cashier and that

(e) Lunatic, or an Idiot, or a person of unsound mind.

the said William Fildsend

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) - Having known him for years, I observed a great change in his demeanour, he became nervous & undecided, thought he was suffering from various diseases, supposed his case was wrong, could not sleep, & finally refused food saying he could not afford it - refused medicines - remained moody & silent when addressed - at times refused to answer my questions - changed appearance in a few days

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His conduct towards his wife & child changed - refused medicine and if not watched - constantly fearful of his accounts being wrong although appeared to the contrary to attempts to have money from his employers - This information I had from his wife

Signed,

Name, William Evans M.D. - L.R.C.S.I.

Place of Abode, 5 & 7 Little Horton Lane Bradford

Dated this twenty sixth day of November One Thousand Eight Hundred and Seventy two

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (a)

a (b) as a Patient in your House.

Subjoined is a statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any).....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment....

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent .....

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the twenty second day of June 1872 at (c) Grays Hotel Railway Street York in the County of York separately from any other Medical Practitioner, personally examined Margaret McNish wife of James McNish of (d) 5 Albert Drive Crosshill Glasgow and that the said Margaret McNish is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Said Delusions — Patient — a belief that she has no hope of salvation — that says that she wishes to destroy herself

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, S. W. North
Place of Abode, 31 Castlegate York
Dated this 22nd day of June One Thousand Eight Hundred and Seventy two.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Kaplan being a (a) Member of the Royal College of Surgeons, Eng. and being in actual practice as a (b) Surgeon hereby certify, that I on the 22nd day of June at (c) Grays Hotel, Railway St. York, in the county of York separately from any other Medical Practitioner, personally examined Margaret Mc Nish of (d) 5. Albert Drive - Crosshill - Glasgow and that the said Margaret Mc Nish is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) The Labour under the Delusion that she and her children are suffering from some dreadful bodily disease, from which it is impossible to recover. She asserts that her sins are so great that she has no chance of salvation. She says that God has no sustaining properties for her, and she therefore refuses to take it.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, William Kaplan.
Place of Abode, 25. Peasgate - York
Dated this 22nd day of June One Thousand Eight Hundred and Seventy two.

N° 1205. G R Barritt

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive George Roberts Barritt whom I last saw at the Ipswich Boro. Asylum on the Twenty Ninth day of the First month 1873 (a) a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said George Roberts Barritt

Signed, *Name,* James Barritt
Occupation (if any), Confectioner
Place of Abode, Woodbridge
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this Twenty ninth Day of First month
One Thousand Eight Hundred and Seventy Three

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	George Roberts Barritt
Sex and Age	Male Æt 20
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	~~Printer~~ Printer
Religious persuasion, as far as known	not decided as a member
Previous Place of Abode	Framlingham
Whether First Attack	First
Age (if known) on First Attack	about 18 yrs
When and where previously under Care and Treatment	Ipswich Boro. Asylum
Duration of existing Attack	abt. 2 yrs
Supposed Cause	Scarlet Fever
Whether subject to Epilepsy	not
Whether Suicidal	not
Whether Dangerous to others	at times
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	no
Name and Address of Relative to whom Notice of Death to be sent	Father J Barritt Woodbridge

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) James Barritt
Occupation (if any), Confectioner
Place of Abode, Woodbridge
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Barrington Chevallier
being a (a) Member of the Royal College of Physicians in London
and being in actual practice as a (b) Physician
hereby certify that I, on the 29th day of January 1873
at (c) the Borough Lunatic asylum, Ipswich,
in the County of Suffolk separately from any other Medical Practitioner,
personally examined George Roberts Barritt
of (d) Church Street, Woodbridge Suffolk and that
the said George Roberts Barritt
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) - He is in a state of Dementia, talking to imaginary persons, calling himself by another name than his own, but declining or unable to answer questions.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr. C. F. Long, Superintendent of the Ipswich Borough Asylum, informs me that he is at times excited and dangerous to others.

Signed, Name, Barrington Chevallier M.D. Oxon.
Place of Abode, The Grove, Ipswich
Dated this 29th day of January One Thousand Eight
Hundred and Seventy three

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Branford Edwards
being a (a) Licentiate of the Royal College of Physicians in London and Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 29th day of January 1873
at (c) the Borough Lunatic Asylum Ipswich
in the county of Suffolk separately from any other Medical Practitioner,
personally examined George Roberts Barritt
of (d) Church Street Woodbridge Suffolk and that
the said George Roberts Barritt
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He obstinately refuses to enter into any conversation or answer reasonable questions. Is constantly shuffling about and muttering to himself

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr. C. F. Long (Medical superintendent) informs me that he is at times violent and very excited talking incoherently, and that latterly he has become worse

Signed, Name, Branford Edwards
Place of Abode, 13 Carr Street Ipswich
Dated this 29th day of January One Thousand Eight
Hundred and Seventy three

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? — He is not a member but his Parents are, having him rec^d. into membership

2. Where was the place of birth of the patient? Woodbridge

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? nothing peculiar

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? He was a bright intelligent child until he has the Scarlet fever at the age of eight yrs.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He recd a fair education in his native Town Early. at a Superior Grammer School & made some proficiency in French & Latin

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Printing Business he was industrious & a Strict Abstainer and of regular habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Nothing uncommon

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? none

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? — never

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? at the age of eight years he has a very severe attack of Scarlet Fever

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? none

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Originating cause Scarlet fever

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? at the age of 18 years

15. What has been the duration of the present attack? about 2 years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? He has been part of the time much better and under private care

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? He was out of the assylum 6 weeks first & at another time 12 weeks

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? He was disturbed in his sleep & very excitable temperament

19. What were the first decided symptoms of mental aberration? suffering from abscess at the corner of the eye had visions of a painful kind

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. various delusions the first was that he must leave his home at a certain hour but no settled delusion

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? violent at times

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? he refused food for 3 days when first taken

23. What are the habits of the patient as regards personal cleanliness and decorum? rather untidy of late

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. suffering from the forth abscess on the eye

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Boro assylum I provich

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? Tonics, and employment at printing with good effect at times

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? the malady is evidently increasing steadily

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

James Barrett
Woodbridge
Suffolk

1206 Ann Daffery

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Walter Philip Saffery
Consuls Office
Bank of England
London

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Anne Saffery

whom I last saw at Bruce Grove Tottenham Middlesex

on the twentieth day of February (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Anne Saffery

Signed, *Name,* Walter Philip Saffery

Occupation (if any), Clerk in the Bank of England

Place of Abode, Hadley Green Barnet

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son

Dated this twentieth Day of February

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Anne Saffery
Sex and Age	Female. Sixty Nine
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	Baptist Minister's Widow
Religious persuasion, as far as known	Baptist
Previous Place of Abode	Hadley Green, Barnet
Whether First Attack	Yes
Age (if known) on First Attack	Forty years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Thirty years
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Walter Philip Saffery Consols Office Bank of England London

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Walter Philip Saffery

Occupation (if any), Clerk in the Bank of England

Place of Abode, Hadley Green Barnet

Degree of Relationship (if any), or other circumstance of connexion with the Patient Son

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Cooper Luckwell

being a (a) Member of the Royal College of Surgeons & Licentiate of the Apothecaries' Company

and being in actual practice as a (b) Surgeon & Apothecary at Bruton Street

hereby certify that I, on the 19th day of February 1873

at (c) Bruton Street

in the County of Kent separately from any other Medical Practitioner,

personally examined Anne Saffery,

of (d) Hadley Green, Barnet Middlesex and that

the said Anne Saffery

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) She informed me in my visit[illegible] here to day that her life had been nearly destroyed by some unseen enemy who attacks her while in bed. She states herself to be in constant fear from this source.

2. Other facts (if any) indicating Insanity communicated to me by others (g) She imagines herself to be the victim of unseen persecutors who throw poisonous air into her mouth imagine herself unable to swallow, Father

Signed, Name, John Luckwell

Place of Abode, Bruton Street

Dated this 19 day of Feb. One Thousand Eight Hundred and Seventy Three.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Judicio poisoned communicated by her daughter Mrs W. Richardson

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Edward Hooper Allay

being a (a) Fellow of the Royal College of Surgeons

and being in actual practice as a (b) Surgeon

hereby certify, that I on the nineteenth day of February

at (c) Bruce Grove - Tottenham

in the county of Middx. separately from any other Medical Practitioner,

personally examined Anne Saffery

of (d) Hadley Green, Barnet, Middlesex and that

the said Anne Saffery

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz—

1. Facts indicating Insanity observed by myself (f).

She tells me that she considers her ailment to be due to some influence exercised upon her by some unseen or supernatural agency, which she seems to think has brought upon herself by uttering some curse of scripture some years ago, which was first cured by some farmers & that several friends have been concerned in the matter especially the late Empress of France to the latter she wrote & sent a letter

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Walter Philip Bowker tells me that the account of her friends of being in danger [illegible] She considers herself [illegible] to be cured by a white light [illegible] that they [illegible] to some house occupied by another tenant, which [illegible] to [illegible] & believing accordingly that it will meet

Signed, Name, Edward Hooper Allay

Place of Abode, Bruce Grove Tottenham.

Dated this nineteenth day of February One Thousand Eight Hundred and Seventy three

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Her parents were in some way connected with Friends & some cousins are still in the Society

2. Where was the place of birth of the patient?

Wokingham, Berkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

As far as known nothing particular in any way

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

She was carefully brought up & educated at an ordinary boarding school

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

She was for some years a teacher in a school for young ladies & was much valued for her efficient help & has ever had the regard of those [illegible] her

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Twenty six years. Six children. (two pairs of twins) The eldest would have been 43. The youngest is thirty four.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No very distinct pursuit or bias of any kind

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

She had several miscarriages & premature confinements

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No hereditary predisposition is known to have existed & no very near relatives have been insane with the exception of a nephew in Africa

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The first attack came on about the time of change of life

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Forty years

15. What has been the duration of the present attack?

Thirty years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First Attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Although the mental disorder has never quite left her there have been one or two intervals of a year or two in which it seemed much abated. ~~[illegible]~~ [illegible] [illegible] [illegible] [illegible] years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

As far as known — No

19. What were the first decided symptoms of mental aberration?

Fancies that she was the object of ridicule & caricature in some of the publications of the day.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The insanity has been peculiarly manifested in her supposing herself to be the object of persecution by unseen enemies. No other subject seems to affect the mind. She sometimes has the delusion that she has special revelations as to her movements, [illegible]

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She is under the impression that she cannot drink easily ~~[illegible]~~ (sometimes) swallow her food but whether the feeling is connected with any real weakness or not we have never quite been sure.

23. What are the habits of the patient as regards personal cleanliness and decorum?

perfectly those of a sane person

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes, considering her advancing years.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Frequent & considerable journeys & changes of scene & society were tried some years back & were no doubt useful in abating & checking the mental disorder.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Rather increasing. Spring & Autumn for some years seemed to be particularly trying seasons ~~to~~ but latterly the restlessness seems to have been much alike at all times.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Walter Philip Saffery
Consols Office
Bank of England
London

1207 Mary Nelson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? — No

2. Where was the place of birth of the patient? — Scotland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? — no

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? — quiet steadiness & perseverance & naturally amiable not precocious

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? — both cultivated in early life - educated at Friends School until about 16 - afterwards at Young Ladies Institution Edinburgh for about 2 years

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. — strictly temperate and most industrious in domestic duties & very dutiful child

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. — not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? — pursued her intellect - and studies with great earnestness and perseverance

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? — nothing of the kind

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? — No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? — about the age of 7 had a severe cheat affection combined with Neuralgy

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? — No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? — derangement of general health

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 21½ years

15. What has been the duration of the present attack? 3 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? a slight wilfulness of temper has noticed

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? not at all

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? often upset soup

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Richard Nelson
Saint Leonard
Hendal

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Nelson whom I last saw at York on the twenty sixth day of March (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Mary Nelson

Signed, *Name,* Richard Nelson
Occupation (if any), Manufacturer
Place of Abode, Kendal
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this 26th Day of March
One Thousand Eight Hundred and Seventy Three

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Mary Nelson
Sex and Age	Female - about Twenty two
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	a lady
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Kendal
Whether First Attack	Yes
Age (if known) on First Attack	21½ years
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Three Months
Supposed Cause	derangement of health
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Richard Nelson - Kent Terrace Kendal

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Richard Nelson
Occupation (if any), Manufacturer
Place of Abode, Kendal
Degree of Relationship (if any), or other circumstance of connexion with the Patient Father

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Peter Clarke

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify that I, on the twenty third day of March

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) the house of Mrs Read 69 Micklegate York

in the County of York separately from any other Medical Practitioner,

Kent Jersey required

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Mary Nelson - Single woman

of (d) ~~Kendal~~ Right Street Kendal and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Mary Nelson

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She say a dull heavy appearance - Does not seem to appreciate my questions addressed to her - Answers rare

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

I am informed by the father Mr Nelson that she considers herself a Queen & attaches great importance thereto

Signed, Name, William Peter Clarke

Place of Abode, 24 Micklegate York

Dated this twenty third day of March One Thousand Eight Hundred and Seventy three

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the twenty ninth day of March 1873

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Mrs Reads 69 Micklegate York

in the county of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Mary Nelson single woman Kendal

of (d) Kendal - Daughter of Richard Nelson of Kendal Grocer and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Mary Nelson

is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She only made exclamations - is unable to enter upon any conversation - In answer to all my questions is incoherent & without purpose.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

For Nelson her father informs me that for several weeks she has taken no part in any conversation - that she appears low spirited

Signed, Name, S. W. North

Place of Abode, 31 Castlegate York

Dated this 29 day of March One Thousand Eight Hundred and Seventy three

1214 Eleanor Long
1208

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Eleanor Long whom I last saw at Settington on the Tenth day of January (a) a person of unsound mind (b) as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Eleanor Long

Signed, *Name,* Charles M. Long
Occupation (if any), Clergyman
Place of Abode, Settington near Malton
Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this Twelfth Day of January
One Thousand Eight Hundred and Seventy four.

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Eleanor Long
Sex and Age	Female - 29 years of age.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Lady.
Religious persuasion, as far as known	Church of England.
Previous Place of Abode	Settington Rectory
Whether First Attack	Third attack.
Age (if known) on First Attack	26.
When and where previously under Care and Treatment	The Friends' Retreat in 1873.
Duration of existing Attack	Coming on for the last 3 weeks.
Supposed Cause	Exciting & perplexing.
Whether subject to Epilepsy	No.
Whether Suicidal	No.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	The Revd C. M. Long Settington Rectory.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Charles M. Long
Occupation (if any), Clergyman
Place of Abode, Settington
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Coates being a (a) Member of the College of Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the 12th day of January 1874 at the house of John Clarke, Heslington Road, York. in the County of York separately from any other Medical Practitioner, personally examined Eleanor Long, daughter of Archdeacon Long of (d) Settington and that the said Eleanor Long is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)
For conversation incoherent rambling

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* William Coates
Place of Abode, Petergate - York
Dated this 12 day of January One Thousand Eight Hundred and Seventy four

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the 12th day of January 1874 at the house of John Clarke Heslington Road, York in the county of York separately from any other Medical Practitioner, personally examined Eleanor Long, daughter of Archdeacon Long of (d) Settington, and that the said Eleanor Long is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
Rambling incoherent conversation

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* S. W. North
Place of Abode, 15 Castlegate York
Dated this 12 day of January One Thousand Eight Hundred and Seventy four

1209 Thos Jennings

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Yes

2. Where was the place of birth of the patient? Norwood

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
when a Youth Considered him above an average in his calling

5. Were the understanding and the affections much cultivated in very early life; to what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? educated at Home and in Hobyte Seminary York

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Farming — temperate and industrious

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
No

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
None

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
It was considered a fall from a Horse was partly the cause of the first attack. he has had other falls from Horses which may have brought on the last attack

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? eighteen

15. What has been the duration of the present attack? a month

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? once 6 months —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
between the attacks he was never perfectly right

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
no

19. What were the first decided symptoms of mental aberration?
loss of memory when at Wakefield Market

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
he has a perfect mania for Horses, fancies he is making money by Horses - and would go to a great length if allowed

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? no none

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
no

23. What are the habits of the patient as regards personal cleanliness and decorum?
just middling

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
no

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
he has been regularly attended by his own Medical man and every care and attention has been paid to him

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Wm Francis Jennings
Harewood
Sutton on Derwent
York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Thomas Jennings junr

whom I last saw at Norwood

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 24th day of April 1873 (a)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Thomas Jennings junr

Signed, *Name,* Hugh Nottingham

Occupation (if any), Farmer

Place of Abode, Harsnill

Degree of Relationship (if any), or other circumstances of connexion with the Patient Uncle by marriage

Dated this 26th Day of April

One Thousand Eight Hundred and ~~Sixty~~ seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Thomas Jennings Junr
Sex and Age	Male Age 20
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Farmer
Religious persuasion, as far as known	attends the Wesleyan Chapel
Previous Place of Abode	Norwood
Whether First Attack	second
Age (if known) on First Attack	eighteen
When and where previously under Care and Treatment	~~Hanwell~~ no where
Duration of existing Attack	a month
Supposed Cause	a fall from a Horse
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	Mr Francis Jennings Norwood

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Hugh Nottingham

Occupation (if any), Farmer

Place of Abode, Harsnill

Degree of Relationship (if any), or other circumstance of connexion with the Patient Uncle by Marriage

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned James William Caley being a (a) Licentiate of the Roy: Coll: Phys: Edin: Mem: Roy: Coll: Surgs: London and being in actual practice as a (b) General Medical Practitioner hereby certify that I, on the twenty second day of April at (c) Storthwaite Park Farm in the County of York separately from any other Medical Practitioner, personally examined Thomas Jennings, Junr of (d) Storthwaite and that the said Thomas Jennings, Farmer & Son is a (e) Lunatic, & proper and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f) Previous attack of Melancholia; a general state of excitement quite opposite to the 1st attack:- Fancies he is making money in buying and selling of horses. Want of natural affection. Untidiness - or rather his usual cannot be depended upon - a Composition. Not his wife after some conversation with me, respecting them

2. Other facts (if any) indicating Insanity communicated to me by others (g) by Mr Hugh Nottingham In the last attack, "jumping" from the bed room window: & the present attack, - a general recklessness in word and action - regardless of consequences:- Communicated by the friends & by the said Thomas Jennings Junr

Signed, Name, James William Caley
Place of Abode, Brotherton, near Selby

Dated this twenty fifth day of April One Thousand Eight Hundred and ~~Sixty~~ Seventy three.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Alfred Jackson being a (a) Licentiate of Roy: Coll. Phys. E. & Roy: Coll. Surgeons and being in actual practice as a (b) General practitioner hereby certify, that I on the Twenty-sixth day of April at (c) Haswell Manor House in the county of York separately from any other Medical Practitioner, personally examined Thomas Jennings Junr of (d) Storthwaite and that the said Thomas Jennings - Farmer is a (e) of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1. Facts indicating Insanity observed by myself (f)
His general excitability -
Paranoic Delusions -
Incoherency in his conversation -

2. Other facts (if any) indicating Insanity communicated to me by others (g) window
told by Hugh Nottingham His having leaped from a bed room
Lavish expenditure of money
Wilful behaviour towards friends

Signed, Name, Alfred Jackson
Place of Abode, Market Weighton.

Dated this 26th day of April One Thousand Eight Hundred and ~~Sixty~~ 73

1210 Sarah Thistlethwaite

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? a Member of the Society; by birthright.

2. Where was the place of birth of the patient? Barnsley, Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? nothing that we remember.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? of a rather dull and quiet disposition.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? A short period under governess at home & afterwards at Ackworth and at Leeds.

6. To what occupation was the patient brought up; and what were ~~his~~ (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Domestic & industrious always —

7. If the patient be married, state at what age ~~his~~ (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. a Widow, in 1864. married in 1859. about 30 years of age — never had any Children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? very Earnest in Domestic matters

9. Has any material change taken place in the pecuniary circumstances of the patient; or has she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? no.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? never —

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? suffered severely from bad legs — which are now quite well.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? — Two Sisters have been so affliated.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? ~~First~~ Second Attack, in 1869 — overwrought with close attention to an invalid Lady — First attack occasioned by changes of circumstances and Father's death —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? to suppose about 28 years of Age.

15. What has been the duration of the present attack? 6 or 7 weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?
a few months —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? ~~duration of the Months~~
They were complete — . —— 23 years since last attack

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? The present attack.
Commenced under great depression of spirits — and sleepless nights —

19. What were the first decided symptoms of mental aberration? despondency

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. violent agitation.
Violent agitation — no hope of salvation —

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?
not that we are aware of.

22. Has the patient shown any disposition to refuse food, or to injure ~~himself~~ herself, and if so, in what way? a disposition to refuse food —
No: 2d The patient now manifests a disposition to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum? — habits cleanly —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. In good health — at present — but has suffered severely from bad legs.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. At Friends' Retreat in 1849 — once a few months under great prostration of bodily health — returned home well.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Has been under Dr. W. Stanwell — but not successful under her present malady.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Disorder appears increasing — many lucid intervals during the day — The greatest agitation is in the morning part of the day —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Supplied from Sarah Thistlethwaite's own Income — say 1£ weekly or 13£ Quarterly —
John Yeardley
Ryefield —
near Rochdale.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Thistlethwaite whom I last saw at Ryefield, Bury Road near Rochdale on the Second ___ day of 5th month — 1873. (a)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Sarah Thistlethwaite

Signed, *Name,* John Yeardley

Occupation (if any), Out of Business

Place of Abode, Ryefield, Bury Road near Rochdale

Degree of Relationship (if any), or other circumstances of connexion with the Patient } a Brother

Dated this Second Day of 5th month —

One Thousand Eight Hundred and ~~Sixty~~ Seventy-three —

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Thistlethwaite
Sex and Age	about 63 years —
Married, Single, or Widowed	Widow since 1864.
Condition of Life, and previous Occupation (if any).....	Housekeeper and Companion to an Elderly Lady & latterly a Housekeeper with about two Boarders &c at Broadfield to 1869.
Religious persuasion, as far as known	of the Society of Friends
Previous Place of Abode	Broadfield — Rochdale — to 1869: at Ryefield since then to present time 1873
Whether First Attack	3rd Attack —
Age (if known) on First Attack	about 28 years of Age —
When and where previously under Care and Treatment....	The Friends Retreat in 1849. at York —
Duration of existing Attack	6 or 7 weeks —
Supposed Cause	Despondency — no hope of Salvation.
Whether subject to Epilepsy	not
Whether Suicidal	not
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	nd
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	John Yeardley (her brother) Ryefield Bury Road near Rochdale —

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Yeardley

Occupation (if any), Out of Business

Place of Abode, Ryefield, Bury Road, near Rochdale

Degree of Relationship (if any), or other circumstance of connexion with the Patient } her Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind

I, the undersigned William Stanwell
being a (a) Member of the Royal College of Surgeons Engl:
and being in actual practice as a (b) Surgeon
hereby certify that I, on the first day of May
at (c) Ryefield n. Rochdale
in the County of Lancaster separately from any other Medical Practitioner,
personally examined Sarah Thistlethwaite
of (d) Ryefield (residing with her brother and that
the said Sarah Thistlethwaite
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
She is gloomy & reserved in her manner or at times violently agitated. has once or twice refused food says that she is doomed to everlasting death.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
She lies nearly all night sleepless & moaning - She says that the nurse engaged to attend to her will destroy her or that she herself will or must do some terrible deed

Communicated by her sister, Ann Yardley & Nurse Sarah Hitchin

Signed, Name, W Stanwell M.R.C.S. &c
Place of Abode, The Elms Rochdale

Dated this first day of May One Thousand Eight Hundred and ~~Sixty~~ Seventy three.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Hodgson
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) Surgeon
hereby certify, that I on the first day of May
at (c) Ryefield near Rochdale
in the county of Lancaster separately from any other Medical Practitioner,
personally examined Sarah Thistlethwaite
of (d) Ryefield and that
the said Sarah Thistlethwaite
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She sits rocking to and fro looking the picture of despondency - She tells me that there is nothing but utter misery and ruin for her soul. I cannot get her to speak of anything except her soul and the impending punishment.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Mr. Yardley, her brother, tells me that sometimes she screams for hours together most violently, and all efforts to pacify her are unavailing.

Signed, Name, William Hodgson
Place of Abode, The Butts - Rochdale

Dated this first day of May One Thousand Eight Hundred and ~~Sixty~~ Seventy three.

~~1242~~ 1241 Mary Ann Latchmore

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas Latchmore
Medical

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Margaret Ann Latchmore whom I last saw at 4 Ridge Mount Leeds on the 11th day of June 1873 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Margaret Ann Latchmore

Signed, *Name,* Joseph Latchmore
Occupation (if any), Wholesale Draper
Place of Abode, 8 Montpelier Terrace Leeds
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 11th Day of June 1873

One Thousand Eight Hundred and Sixty

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Margaret Ann Latchmore
Sex and Age	Female 32
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	no occupation
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	Kitchin
Whether First Attack	second attack
Age (if known) on First Attack	Eighteen years
When and where previously under Care and Treatment	The Retreat York 1859
Duration of existing Attack	Six months — been unsettled for some years
Supposed Cause	Constitutional
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	Yes —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	No
Name and Address of Relative to whom Notice of Death to be sent	Thomas Latchmore — Kitchin.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Joseph Latchmore
Occupation (if any), Wholesale Draper
Place of Abode, 8 Montpelier Terrace Leeds
Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Surgeon, and Fellow of the Royal College of Surgeons of England

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify that I, on the tenth day of June 1873

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) No 4 Ridge Mount - Cliff Road Leeds

in the County of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Margaret Ann Latchmore

of (d) Hitchin in the County of Hertford of no occupation and that

(e) Lunatic, or an idiot, or a person of unsound mind

the said Margaret Ann Latchmore

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

She declared herself unable to control her ideas - States that her mind is constantly dwelling upon self destruction, and that she shall certainly destroy herself if not prevented; She begged for the protection of the Asylum.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

That she is subject to attacks of violent Excitement :- That she shows a great disposition to destroy almost all kinds of things :- That she has been in confinement on a previous occasion for similar indisposition: These facts were imparted to me by her brother Mr Joseph Latchmore

Signed, Name, C. G. Wheelhouse F.R.C.S.

Place of Abode, Hilary Place Leeds

Dated this tenth day of June One Thousand Eight Hundred and ~~Sixty~~ Seventy three.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor in Medicine of the University of St Andrews and a Member of the Royal College of Surgeons of England

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) general Practitioner

hereby certify, that I on the tenth day of June 1873

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) No 4 Ridge Mount. Cliff Road Leeds

in the county of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Margaret Ann Latchmore

of (d) Hitchin in the County of Hertford of no occupation and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Margaret Ann Latchmore

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

She told me she was quite unable to control her impulse to self destruction, that she did not feel safe when alone, and that she felt unable to resist the propensity to attack others

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Letters which have been shown me contain ideas of self destruction. She is subject to violent excitement. These letters were shown to me and facts told to me by her brother Mr Joseph Latchmore

Signed, Name, G. C. Gomez M.D.

Place of Abode, Grosvenor Lodge Grosvenor Pl. Leeds

Dated this tenth day of June One Thousand Eight Hundred and ~~Sixty~~ Seventy three

1212 William Wheatley

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

He is a member by Birthright

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not that I am aware of

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

I know nothing of his early life. His literary education was of very limited extent, & I should think at a village school.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

He was a Brecklayer. His habits I believe were always industrious, temperate & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

His wife died about 14 years since. I believe they never had any children.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Not that I know of

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

He lost by the depreciation in value of his investments in Railways about the year 1850 — but not I believe to any very serious extent.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Not that I am aware of

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

I have no information on this head

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

I do not know of any hereditary predisposition, but a Brother and Sister died in advanced life, inmates of Asylums — the former in the North Riding Asylum, and the latter in the Retreat.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

There has been a gradual decay of the mental powers

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

I think when was 72 or 73

15. What has been the duration of the present attack?

It has steadily progressed since that time

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

The first symptoms of mental weakness I am aware of were his losing his way in streets with which he had been perfectly familiar for many years.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The Disorder is manifested by dementia and imbecility and by all but total loss of memory. He is able to walk a mile or more, but he has no idea of using a knife, fork or spoon.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Nothing of the kind.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

He is unconscious on these points, and as regards the functions of nature, requires as much attention as an infant.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

He is in good bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

It was the opinion of a medical man who was consulted about some temporary bodily indisposition, that the failure of the mental powers was a gradual natural process which could not be arrested

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

It is steadily increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

The Overseers of York Meeting of the Society of Friends are responsible. — The Quarterly Accounts to be sent to Thomas Thompson No 1. St Mary's, York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Wheatley

whom I last saw at No 14 Darnborough Street, York

on the thirteenth day of June (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Wheatley.

Signed, *Name,* Silvanus Thompson

Occupation (if any), Schoolmaster

Place of Abode, No 1. St Mary's, York

Degree of Relationship (if any), or other circumstances of connexion with the Patient One of the Overseers appointed by the ~~Society of Friends in York, to have the care of its poorer members of whom William Wheatley is one.~~

Dated this Eighteenth Day of June

One Thousand Eight Hundred and ~~Sixty~~ Seventy-three.

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	William Wheatley
Sex and Age	Male - age 77 years - Born 1 April 1796.
Married, Single, or Widowed	Widower
Condition of Life, and previous Occupation (if any)	Journeyman Bricklayer
Religious persuasion, as far as known	A member of the Society of Friends.
Previous Place of Abode	14 Darnborough Street, York
Whether First Attack	First attack
Age (if known) on First Attack	He might be 72 or 73.
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Perhaps 4 years
Supposed Cause	Natural decay.
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Mary W. Brown, care of John Richardson, Langbergh Mr Great Ayton via Northallerton; and also to Silvanus Thompson, No 1 St Mary's, York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Silvanus Thompson

Occupation (if any), Schoolmaster

Place of Abode, No 1 St Mary's, York.

Degree of Relationship (if any), or other circumstance of connexion with the Patient One of the Overseers appointed by the Society of Friends in York, to have the care of its poorer members, of whom William Wheatley is one

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Jane Mennell Williams
being a (a) Member of the Royal College of Surgeons Eng.
and being in actual practice as a (b) Surgeon
hereby certify that I, on the nineteenth day of June 1873
at (c) 14 Dambro's St Bishophill Rd
in the County of York separately from any other Medical Practitioner,
personally examined William Wheatley Journeyman Bricklayer
of (d) 14 Dambro's Street and that
the said William Wheatley
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) His language his quite incoherent, he has no knowledge of persons about him and he is suffering from senile imbecility —

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, *Name,* J. M. Williams
Place of Abode, 45 Micklegate York
Dated this nineteenth day of June One Thousand Eight Hundred and ~~Sixty~~ Seventy three

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Robt Baker
being a (a) Doctor of Medicine of the University of Edinburgh
and being in actual practice as a (b) Physician
hereby certify, that I on the twentieth day of June 1873
at (c) 14 Dambro's Street Bishophill Road. York
in the county of York separately from any other Medical Practitioner,
personally examined William Wheatley Journeyman Bricklayer
of (d) 14 Dambro's Street York and that
the said William Wheatley
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He is incoherent in his ideas & conversation; he does not recognise persons about him — and cannot say whether his wife is dead or alive

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, *Name,* Robt Baker
Place of Abode, Lawrence House York
Dated this twentieth day of June One Thousand Eight Hundred and Sixty Seventy-three

1213 John Rickering

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A Friend by Birthright

2. Where was the place of birth of the patient? Garrigill Gate near Alston Cumberland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? have understood he was always Nerves

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? weak Minded very eccentric & peculiar

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? the Village School at home not known

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. not fond of work but attended to duty temperate his conduct good

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. been Married twice first time when Young & Child a Son Age 42 or 3 last Marriage his Age 50 No Children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? any thing of a religious nature

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No but often complained of a swimming in the head

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? when about 24 was ill 3 Months of a Nerves complaint

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No but several of his relatives weak Minded

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? No reason known

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 65 but not thought accountable for his actions for several years

15. What has been the duration of the present attack? about two months —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? this attack commenced on Xmas day and says he is Dieing

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? always low in spirits

19. What were the first decided symptoms of mental aberration? apprehensions of serious results from the most trivial causes — great tendency to melancholy

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. chiefly by one he is Dieing and if left will be found Dead —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? no.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? no. has refused food the last 2 Days

23. What are the habits of the patient as regards personal cleanliness and decorum? clean and decent and acts with Decorum

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Dyspeptic

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. none

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? The usual remedies for Dyspepsia & Melancholia —

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? remains much in the same state.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Pickering

whom I last saw at 104 Fenton Street Leeds

on the 26 day day of 6 Month 1873 (a)

a person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said John Pickering

Signed, *Name,* Mary Pickering

Occupation (if any),

Place of Abode, 104 Fenton Street Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient Wife

Dated this 26 Day of 6 month

One Thousand Eight Hundred and Sixty 73

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	John Pickering
✓ Sex and Age	— — Male 66 years
Married, Single, or Widowed	— — Married
Condition of Life, and previous Occupation (if any)	— — Book Agent
Religious persuasion, as far as known	— — Friends
Previous Place of Abode	— — Care taker at Backhouse Bank Durham
Whether First Attack	— — cant say
✓ Age (if known) on First Attack	— increasing weakness for the last 14 years
✓ When and where previously under Care and Treatment	— no where
✓ Duration of existing Attack	about 7 Months
Supposed Cause	No cause known
Whether subject to Epilepsy	both a brother & sister Died of it
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mary Pickering 104 Fenton Street Leeds

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Mary Pickering

Occupation (if any),

Place of Abode, 104 Fenton Street Leeds

Degree of Relationship (if any), or other circumstance of connexion with the Patient Wife

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Ludwin Foster being a (a) Licentiate of the London College of Physicians and being in actual practice as a (b) Physician & Surgeon hereby certify that I, on the 25th day of June 1873 at (c) 11 Paved Place Leeds in the County of York separately from any other Medical Practitioner, personally examined John Pickering agent of (d) Fenton St Leeds and that I the said John Pickering is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) He has an apprehension of fatal consequence following all his ordinary Occupations thinks that for example if he don't take Physic Medicine he will die of Constipation & that if he take Physic it will bring on fatal diarrhea — Conversation friendly & coherent —

2. Other facts (if any) indicating Insanity communicated to me by others (g) His wife informs me that he will frequently disappear at night & that also without being able to give any rational account of his conduct.

Signed, Name, Ludwin Foster
Place of Abode, 11 Paved Place Leeds
Dated this 25th day of June One Thousand Eight Hundred and ~~Sixty~~ seventy three —

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Ralph Beardshaw being a (a) Member of the Royal College of Surgeons England and Licentiate of the Apothecary Company and being in actual practice as a (b) Surgeon hereby certify, that I on the 25 day of June 1873 at (c) Fenton St Leeds 104 Fenton St Leeds separately from any other Medical Practitioner, personally examined John Pickering of (d) Fenton St Leeds agent and that I the said John Pickering 104 Fenton St Leeds is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) ~~Incoherency~~ Rambling and talking on various subjects, fear ~~Delusion~~ Breathlessness & Pain & fear to go to bed on account of being found dead in the morning by his

2. Other facts (if any) indicating Insanity communicated to me by others (g) His wife informs me he wanders about from home and unable to find his way back, and refuses to take food

Signed, Name, Ralph Beardshaw
Place of Abode, Carlton Lodge Leeds
Dated this 26 day of June One Thousand Eight Hundred and Sixty three

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1214 Sarah Lury

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Yes by Birth right

2. Where was the place of birth of the patient?

Bristol

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Subject about 13 when at School – She had a fit of Hysteria bordering on Epilepsy, or mild Epilepsy

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

very amiable fair talent strength no eccentricity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

She was always very affectionate in her disposition was mildly attacked by the fancies she had since mentioned at a day School to afterwards began at Wedding School terminated by the fit (No 3)

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

remarkably diligent in teaching at first day the School visiting poor holds meetings &c – no intemperate habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single – never engaged in love affair

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

See No 6 – No other Opinion but myself to be a kind nurse, which her health did not allow of

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

None

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

See No 3 – The Same fits have occurred at intervals – the shortest interval – has been 2½ yrs – next about 2 Years – the last in December 1871

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

only those incident to Children

Shew marks on legs from Scratched head when a Child

Breast & back severe Salivation two months

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

None either Side or to fits

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

This is only the present – If any cause can be assigned by its own delusion Sexchronus connected with No 6

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Last Tuesday

15. What has been the duration of the present attack?

Since

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

none upon

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Too excited to sleep for a few days

19. What were the first decided symptoms of mental aberration?

Talking fast.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

religious subjects

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No never

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Ie refuse food during this few days, illegs something not to injure herself or other

23. What are the habits of the patient as regards personal cleanliness and decorum?

good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Lady in good health when this came on

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

The medical attendant goes with her will describe

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing rapidly ~~for~~ day to day
~~the~~ obtains her affection for her friends & the knows
partly what she says but cannot be said to have lucid
intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

The Father

S. W. Lury
Saffron Walden
Essex

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Jane Lury

whom I last saw at my House

on this Sixteenth day of July (a)

a (b) person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said

Signed, *Name,* Samuel Harford Lury

Occupation (if any), Chief clerk in a Banking House

Place of Abode, Saffron Walden

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this Sixteenth Day of July

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Jane Lury
Sex and Age	female 26 last birthday
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	
Religious persuasion, as far as known	Friend
Previous Place of Abode	Saffron Walden
Whether First Attack	yes
Age (if known) on First Attack	
When and where previously under Care and Treatment	
Duration of existing Attack	5 days
Supposed Cause	religious excitement
Whether subject to Epilepsy	tendency to
Whether Suicidal	not
Whether Dangerous to others	not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Saml H Lury Saffron Walden

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) S. H. Lury

Occupation (if any),

Place of Abode, Saffron Walden

Degree of Relationship (if any), or other circumstance of connexion with the Patient Parent

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Edward Parker

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Licentiate of the Royal College of Physicians & Licentiate of the Apothecaries Society London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) a Surgeon Practitioner

hereby certify that I, on the 16th day of July 1875

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) High Street Saffron Walden

in the County of Essex separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Sarah Jane Lucy of (d) High Street Saffron Walden Spinster and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Sarah Jane Lucy

is a (e) Person of Unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She appears restless, saying to Dr Stephenson "Dr Richard make them." & "She rubbing repeatedly backwards & forwards" to stand upon a mantle shelf to warm her cold feet.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) The attendant Edward Erasmus Martin, tells me it takes three Men to restrain her, & that she has been screaming crying, & laughing incessantly - & refuses to eat & has attempted to injure herself.

Signed, Name, Edward Parker

Place of Abode, Saffron Walden Essex

Dated this 16 day of July One Thousand Eight Hundred and Seventy Three.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Alfred Nicholas Jones

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons and Licentiate of the Apothecaries Society

and being in actual practice as a (b) Surgeon and Apothecary

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the fifteenth day of July 1873.

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) High Street Saffron Walden

in the county of Essex separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Sarah Jane Lucy of (d) High Street Saffron Walden and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Sarah Jane Lucy

is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She is suffering from acute mania - Having religious delusions is very violent and insistent in speech - She states that she could not sleep because the pupils of her eyes were too large and that a drop of Belladonna had fallen from her head.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) The Nurse, Martin states that she is very violent requires restraint; and has delusions on religious and medical subjects.

Signed, Name, Alfred N. Jones.

Place of Abode, Saffron Walden

Dated this fifteenth day of July One Thousand Eight Hundred and Seventy three.

1215 M R Sharp

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Richardson Sharp whom I last saw at Great Ayton on the 31st of 7th month 1873 on the day of (a) a (b) a person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said M R Sharp

Signed, Name, John R. Brodie

Occupation (if any), Lawyer

Place of Abode, * North Street Ds (Coloured Thro'out)

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Her Brothers Brother

* Letter address to be given

Dated this 6th Day of 8th month

One Thousand Eight Hundred and Seventy Three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length ..... Mary Richardson Sharp

Sex and Age ..... female age 33 years 24th of 12 mo 1839

Married, Single, or Widowed ..... Single

Condition of Life, and previous Occupation (if any) ..... In a short time a Teacher

Religious persuasion, as far as known ..... Lately resigned membership as a Friend attender Church

Previous Place of Abode ..... Middlesbro', Ayton, Swinton & Scotland

Whether First Attack ..... No

Age (if known) on First Attack 26

When and where previously under Care and Treatment .... At the Friends Retreat from March 8 to Nov 1867

Duration of existing Attack ..... Very eccentric for 2 years & decidedly insane for 3 months

Supposed Cause ..... ? A disappointed attachment

Whether subject to Epilepsy ..... No

Whether Suicidal ..... Threatened to jump out of a window - not otherwise suicidal

Whether Dangerous to others ..... No

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent ..... Isaac Sharp, North Ormesby, Middlesbro

Isaac Sharps address shd be given

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) J. R. Brodie

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient }

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Lawson Fleck Cumming being a (a) M.R.C.S. & L.S.A. and being in actual practice as a (b) Surgeon & Apothecary hereby certify that I, on the 7th day of August 1873 at (c) Great Lepton in the County of York personally examined Mr. R. Sharp of (d) Lepton Moorhouse and that the said Mary Ann Anderson Sharp is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

1. Facts indicating Insanity observed by myself (f) That I observed at the Physiognomy is forcibly similar to that observed at North Shields in March 1867 — a few short times previously to the attack which he had there.

2. Other facts (if any) indicating Insanity communicated to me by others (g) He has got numerous delusions — in which he is at present labouring, communicated from time to time; and the following — "That he is dressed to the Queen" "That the Government of England is about to be removed from London to the Provinces — York, Liverpool, &c." "That the Police has authority to look after the Residents and lay gas pipes in this locality"

Signed, *Name,* L. F. Cumming

Place of Abode, Great Lepton Near Leeds

Dated this 7th day of August One Thousand Eight Hundred and Seventy three

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,*

Place of Abode,

Dated this day of One Thousand Eight Hundred and Seventy

D.L. It is my unalterable opinion that seclusion is essentially requisite for his personal safety and his restoration to health. L.F.C.

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She was born in Membership but since her first attack has resigned, it is believed under partial aberration of mind.

2. Where was the place of birth of the patient? Darlington

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Not so far as we know

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Please refer to former answers furnished by her Father who only can answer it fully —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was educated at Polam School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. She was a short time a Teacher

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Not married -

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Not particularly —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? I believe She has been disappointed in love prior to each attack -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No -

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Her Father's half Sister is in the Retreat and some distant relations have been so afflicted -

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? See No 9

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

This note was not observed at first.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack? She has seldom appeared perfectly well since her former attacks, but has appeared decidedly worse the last 2 years.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? supplied in previous answers. When in Scotland refused to see her father before he left for Norway, altho he had gone so far to see her - exhibits an intense dislike to his company, notwithstanding his extraordinary kindness to her.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. One constant delusion is that of underground communication, but she has lived so much alone it is difficult to say -

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No

23. What are the habits of the patient as regards personal cleanliness and decorum? Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. She seems in good health at present

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? She has been a short time under the care of Wm Loy but no as no one has had any control over her, in this way she has done as she liked.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Her state varies at some periods. She appears worse at the time of full moon

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (a)

a (b) as a Patient in your House.

Subjoined is a statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

Dated this Day of

One Thousand Eight Hundred and Sixty

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any).....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment....

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent .....

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the eleventh day of August 1873 at (c) Grays Adelphi Hotel Railway Street York in the County of York separately from any other Medical Practitioner, personally examined Mary Richardson Sharp Spinster and that of (d) Great Ayton near Northallerton in the said Mary Richardson Sharp is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Rambling incoherent conversation

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* W. North

Place of Abode, 31 Castlegate York

Dated this 11 day of August. One Thousand Eight Hundred and ~~Sixty~~ Seventy three.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Drapkin being a (a) Member of the Royal College of Surgeons Eng. and being in actual practice as a (b) Surgeon hereby certify, that I on the Eleventh day of August 1873. at (c) Grays Adelphi Hotel, Railway St, York in the county of York separately from any other Medical Practitioner, personally examined Mary Richardson Sharpe of (d) Great Ayton near Northallerton, Englishwoman and that the said Mary Richardson Sharpe is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Her conversation is exceedingly wild and incoherent - She states that she is frequently seeing visions of people &c

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* William Drapkin.

Place of Abode, 25. Peasgate. York

Dated this Eleventh day of Augt. One Thousand Eight Hundred and ~~Sixty~~ seventy-three.

512

1216 J.C. Smale

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? London

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? He was always rather hasty and excitable of ordinary understanding and ability. Never head of any precocity of intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He received his instruction at good commercial schools in London and Yorkshire not being much with his parents when young the affections not so much cultivated as in some youths

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Brought up as Bank, Clerk, and Agent always very industrious temperate and regular in conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? He has been a great reader of general literature and very fond of walking and travelling

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? He was always susceptible of colds and his chest thought to be delicate but he was rarely or been unable to attend to his business until compelled to give it up about 18 months since from Partial Deafness

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Partial Deafness and giving up his business

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 56

15. What has been the duration of the present attack? Since April 23rd 1873

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Had an attack about Xmas 1872 very similar to the present one but of short duration. He imagined voices which do not exist and was during the attack very restless and excitable and imagined his property was being made away with

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? Appears perfectly sane in the intervals on all points excepting that he often thought he heard the voices

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? The patient complained of lack of employment and not being able to appy himself to anything on account of his deafness. He retired to rest early and awoke very early in the morning. He thinks he hears voices which do not exist but had not to excitable as when he had the first attack

19. What were the first decided symptoms of mental aberration? Thinking he heard the voices referred to just before stating - and imagining loss of property

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. He imagines loss of property, hearing voices, & that people go to injure him and that his dress shabby are the chief delusions he is also restless and always wishing to change his abode - at times he says he is not fit to be locked up in some society and at times gives money to parties he knows nothing of and who have rendered him no service.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No

23. What are the habits of the patient as regards personal cleanliness and decorum? Very particular in both respects

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. He had a bad cough about 2 years since but change of air removed it - and he appears to have enjoyed a fair average state of health since that time

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. He has been to no other Asylum or Hospital

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? He has been attended by Mr. Frankland & Mr. Taylor & Scarboro who have understand only given him Chlorade when excitable - No change for the better appears to have resulted as yet with his delusions

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? He has lucid intervals which occur at various times, but his delusions are rather increased than diminished

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Henry Stephenson & Francis Senior Watson
Thomas Clough & the Pub. Cts. & County Bank Malton
the accounts to be sent to the latter

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Clough Smale whom I last saw at Scarborough on the Thirteenth day of August 1873 (a) a (b) Lunatic & unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said John Clough Smale

Signed, *Name,* Henry Rogerson

Occupation (if any), out of business

Place of Abode, 4 Princes Terrace Ripon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousin

Dated this twentieth Day of August

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	John Clough Smale
Sex and Age	Male – 57 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Out of business late Bank Agent
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Ripon
Whether First Attack	Yes
Age (if known) on First Attack	56
When and where previously under Care and Treatment	Under care of Mr. Frankland at Ripon & Dr. Taylor at Scarboro
Duration of existing Attack	Since April 23rd 1873
Supposed Cause	Family disputes and giving up business
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Thomas Clough Govt. City & County Bank, Malton

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Rogerson

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

× (Not used on this order.)

MEDICAL CERTIFICAFE—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a)

and being in actual practice as a (b)

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the day of

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) and that

the said

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company or as the case may be.

being a (a)

and being in actual practice as a (b)

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the day of

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) and that

the said

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

was admitted into this (*a*) as a Private Patient, on the

Day of 187 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was received (*b*).

(a) House or Hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

(c) Superintendent or proprietor of ———.

_____

Dated this Day of

One Thousand Eight Hundred and Seventy

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

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ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive John Clough Smale

whom I last saw at Scarborough

on the thirteenth day of August 1873 (a)

a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said John Clough Smale

(a) *Within one month previous to the date of the order.*

(b) Lunatic, *or* an idiot, *or* a person of unsound mind.

Signed, *Name,* Henry Rogerson

Occupation (if any), out of business

Place of Abode, 4 Princess Terrace Ripon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Cousin

Dated this Twentieth Day of August

One Thousand Eight Hundred and Seventy Three

To Dr. John Kitchen

(c) The Retreat (d) near York

(c) Proprietor *or* superintendent of.

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Clough Smale
Sex and Age	Male - 57 years of Age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Out of business formerly Bank. Agent
Religious Persuasion, as far as known	Member of the Church of England
Previous Place of Abode	Ripon
Whether First Attack	Had a slight attack at Ilmas last
Age (if known) on First Attack	56 years
When and where previously under Care and Treatment	Since last attack has lodged at 1 Park Villas Scarboro and been visited by Dr. Taylor of that place.
Duration of existing Attack	Since the 23rd of April last
Supposed Cause	Partial deafness, and giving up business
Whether subject to Epilepsy	Not
Whether Suicidal	Not
Whether Dangerous to others	Not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Not
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Thomas Clough, City & County Bank. Malton

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Henry Rogerson

Occupation (if any),

Place of Abode,

Degree of Relationship (if any) or other circumstances of connexion with the Patient

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

I, the undersigned, Thomas Milne,
being a (a) Graduate in Medicine of Aberdeen University
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the eighteenth Day of August 1873
at (c) Number one Park Villas, Scarborough,
in the County of York separately from any other Medical Practitioner
personally examined John Clough Smale
of (d) No 1, Park Villas, Scarbro', late of Ripon, Bank Agent and that
the said John Clough Smale
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

Patient told me that when a voice in his room commanded him to do anything he felt himself compelled to do it. This voice tells him to go to Gaol & he tries to get to Scarbro' Gaol. In my presence the voice told him he was a fool &c &c. Told me he had lost all his property & securities and that he had seen the persons who robbed him.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

From his Servant Matthew Dishman

Patient often gets up during the night, dresses as if for a journey, and impelled by some irresistible impulse tries to get out of the house. Is suspicious of people he meets in the street, thinks they are going to shoot him. Imagines that fines are imposed upon him wherever he goes.

Signed, *Name,* Thomas Milne MB, CM.

Place of abode, 3. Elders Street, Scarborough.

Dated this Eighteenth Day of August One Thousand Eight Hundred and Seventy Three.

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

I, the undersigned, John Hoove
being a (a) Doctor of Medicine of Edinburgh University
and being in actual practice as a (b) Physician
hereby certify, that I, on the eighteenth Day of August 1873
at (c) No 1 Park Villas Scarborough
in the County of York separately from any other Medical Practitioner,
personally examined John Clough Smale
of (d) No 1 Park Villas Scarborough late of Ripon, Bank Agent and that
the said John Clough Smale
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

He told me a voice in his sitting room told him distinctly this morning that he was a ruined man as all his securities and property were lost. That is a mistake as his property is all safe. He imagines the Lecturer of Scarborough told him he was too shabbily dressed to live in Scarborough but that is a delusion.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

From his Servant Matthew Dishman

He obeys or trys to obey every impulse. He dresses in the middle of the night and attempts to leave the house unless restrained. I imagines he is to be sent to Gaol at some date for some imaginary cause. He is restless nervous & at times very ~~unmanageable~~ unmanageable.

Signed, *Name,* J Hoove M.D.

Place of Abode 15 Albemarle Road Scarborough

Dated this eighteenth Day of August One Thousand Eight Hundred and Seventy three.

1217 W H Horniman

2/10

(a) I, C. D., a justice of the peace for the county, city, or borough of ——, or in the case of two justices, or of a clergyman and relieving officer or overseer, We, C. D. and E. F.

(b) Physician or surgeon, or apothecary, as the case may be.

(c) Lunatic, or an idiot, or a person of unsound mind.

(d) Add, where the lunatic is sent as being wandering at large, the words wandering at large, and in the case of a lunatic sent by virtue of the authority given to two justices, add not under proper care and control, or and is cruelly treated or neglected by the person having the care or charge of him, as may appear to the justices to be the case.

(e) Where the order directs the lunatic to be received into any asylum other than an asylum of the county or borough in which the parish or place from which the lunatic is sent is situate, or into a registered hospital or licensed house, it should state that the justice or justices, or other persons making the order, is or are satisfied that there is no asylum of such county or borough, or that the asylum or asylums thereof is or are full; or (as the case may require) the special circumstances by reason whereof the lunatic cannot conveniently be taken to an asylum for such first-mentioned county or borough.

(f) Asylum, or hospital, or house.

(g) Justices of the peace for the city or borough of ——; or an or the officiating clergyman of the parish of ——. To be signed by two justices where required by the foregoing Act.

(h) The relieving officer of the union or parish of ——, or an overseer of the parish of ——.

(i) Superintendent of the asylum for the county of ——, or the lunatic hospital of ——, or proprietor of the licensed house of ——, describing the asylum, hospital, or house.

ORDER FOR THE RECEPTION OF A ~~PAUPER~~ PATIENT.

Sched. (F.) No. 1.

(a) I John Horniman, Father of the under mentioned William Henry Horniman the undersigned, ~~having called to~~ Assistance a (b) ~~and having personally examined~~ a ~~Pauper, and~~ being satisfied that the said William Hy Horniman is a (c) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment (e)

hereby ~~direct~~ request you to receive the said William Hy Horniman as a Patient into your (f) House

Subjoined is a Statement respecting the said William Henry Horniman as seen by me this day at Ashfield, Torquay Devon

Signed, Name (g) John Horniman

Gentlem

Coombe Cliffe House

Name (h) Croydon Surrey &

Ashfield Torquay Devon

Dated the 2nd Day of October One Thousand Eight Hundred and Seventy three

To Dr Kitching Superintendent of Friends

(i) Retreat of York

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, and Christian Name at length	William Henry Horniman
Sex and Age	male 43
Married, Single, or Widowed	single
Condition of Life, and previous occupation (if any)	gentleman – merchant
The Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	Torquay
Whether first Attack	no
Age (if known) on first Attack	39
When and where previously under Care and Treatment	1871 or 2 Dr Kitching York
Duration of Existing Attack	several months
Supposed Cause	over application to business
Whether subject to Epilepsy	no
Whether Suicidal	yes
Whether Dangerous to others	yes
Whether found Lunatic by Inquisition	no
Union to which the Lunatic is chargeable	
Name and Christian Name, and Place of Abode of nearest known Relative of the Patient, and Degree of Relationship, if known	John Horniman, Croydon Father

I certify that, to the best of my knowledge, the above Particulars are correctly stated.

(k) Relieving officer or overseer.

Signed, Name, (k) John Horniman

Ashfield, Torquay

Lunatics 10.
16 & 17 Vict. c. 97.
~~Pauper~~ Patient.

London: Printed and Published by Shaw & Sons, Fetter Lane.

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MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *In any case where more than one medical certificate is required by this Act, here insert separately from any other medical practitioner.*

(e) *Insert residence and profession, or occupation (if any) of the patient.*

(f) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, undersigned, W. W. S. Tabb

being a (a) Surgeon

and being in actual practice as a (b) Surgeon hereby certify, that I, on the 2 day of oct. 1873

at (c) ~~Torquay~~ Ashfield Hse Torquay in the County of Devon

(d) personally examined William Henry Harriman

of (e) Torquay

and that the said William Henry Harriman

is a (f) person of unsound Mind and a proper Person to be taken charge of and detained under care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(g) *Here state the facts.*

1. Facts indicating Insanity observed by myself (g) great restlessness ~~and~~ incoherent & wandering conversation, delusions as to food & nourishment.

(h) *Here state the information, and from whom.*

2. Other Facts (if any) indicating Insanity communicated to me by others (h) attempting to throw himself out of Window, locking his father in a Bed room, & ordering him to Bed in mid-day, communicated by his father.

Signed, *Name,* W. W. S. Tabb M.R.C.S.

Place of Abode, Croft Lodge - Torquay

Dated this 2 Day of oct.

One Thousand Eight Hundred and Seventy 3 —

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

I, the undersigned, James Pollard being a (a) Surgeon

(b) Physician, surgeon, or apothecary, *as the case may be.*

and being in actual practice as a (b) Surgeon hereby certify, that I, on the 2nd day of October 1873

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) Ashfield Torquay in the County of Devon

(d) *In any case where more than one medical certificate is required by this Act, here insert,* separately from any other medical practitioner.

(e) *Insert residence and profession, or occupation (if any) of the patient.*

(d) personally examined William Henry Horniman of (e) Ashfield. Torquay. Gentleman.

and that the said William Henry Horniman

(f) Lunatic, *or* an idiot, *or* a person of unsound mind.

is a (f) person of Unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(g) *Here state the facts.*

1. Facts indicating Insanity observed by myself (g) muttering to himself but would not speak loud enough for me to hear him. then he left me & kept walking up & down the garden still talking to himself. would not put on his cap. as his father wished him

2. Other facts (if any) indicating Insanity communicated to me by others (h) His Brother. Mr Fredk John Horniman informs me that he was very violent through the night constantly getting in & out of bed that he broke the nursing room door & attempted to throw himself out of the window

(h) *Here state the information and from whom.*

Signed, *Name,* James Pollard M.R.C.S.

Place of Abode, 5 Belgrave Terrace Torquay

Dated this second Day of October

One Thousand Eight Hundred and Seventy Three

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1918 Robina Annandale

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Robina Annandale

whom I last saw at Railway Hotel York

on the seventh day of October 1873 (a)

a (b) person of unsound mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Robina Annandale

Signed, *Name,* James Stockwell

Occupation (if any), Medical Practitioner

Place of Abode, Augyton Park Ormskirk

Degree of Relationship (if any), or other circumstances of connexion with the Patient Friend and temporary guardian

Dated this Seventh Day of October

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Robina Annandale
Sex and Age	Female aged 29 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentlewoman
Religious persuasion, as far as known	Protestant
Previous Place of Abode	St Cuthberts Lodge, Shotley
Whether First Attack	First attack
Age (if known) on First Attack	29 years Bridge, Durham
When and where previously under Care and Treatment	Never under Asylum treatment
Duration of existing Attack	About a fortnight
Supposed Cause	Neuralgia
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	John Annandale Esq: St Cuthberts Lodge - Shotley Bridge, Durham (Brother)

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) James Stockwell

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind

I, the undersigned William Draper
being a (a) Member of the Royal College of Surgeons Eng^d
and being in actual practice as a (b) Surgeon
hereby certify that I, on the seventh day of October
at (c) The Railway Hotel - York
in the County of York separately from any other Medical Practitioner,
personally examined Robina Annandale -
of (d) St. Cuthbert's Lodge, Shotley Bridge, Durham Gentlemen and that
the said Robina Annandale
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She is quite incoherent and rambling in her conversation, - She tells me that she is frequently visited and molested by invisible persons -

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Draper M.R.C.S. &c
Place of Abode, 25 Petergate - York -
Dated this seventh day of October One Thousand Eight
Hundred and Seventy three -

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the seventh day of October 1873
at (c) The Royal Station Hotel York
in the county of York separately from any other Medical Practitioner,
personally examined Robina Annandale
of (d) St. Cuthbert's Lodge Shotley Bridge Durham Gentlemen and that
the said Robina Annandale
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Rambling incoherent conversation

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, S. W. North
Place of Abode, Carthagena York
Dated this 7th day of October One Thousand Eight
Hundred and Seventy three

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 26th day of February 1874, of Robina Annandale a Private Patient in the Friends Retreat, York ~~House~~, to York Lunatic Hospital ~~House~~,

Given under our hands this 11th day of February in the year of Our Lord One Thousand Eight Hundred and Seventy-four

Charles Palmer Phillips
James Wilkes
} Commissioners in Lunacy.

ORDER.

I,* James Stockwell the undersigned having Authority to discharge Robina Annandale a Private Patient in the Friends Retreat, York ~~House~~,

hereby order and direct that the said Robina Annandale be removed therefrom to York Lunatic Hospital ~~House~~,

Given under my hand this* 12th day of February in the year of Our Lord One Thousand Eight Hundred and Seventy-four

(Signed) James Stockwell

Place of Abode Aughton Park. Ormskirk

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient:
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(1000 3 | 72—H & S 5642)

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Robins Annandale's
Transfer.

1219 Lane Davis

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Is a member of the Society of Friends

2. Where was the place of birth of the patient? Dublin —

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Somewhat passionate & selfwilled in Early life — Average understanding nothing uncommon in intellect —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Understanding not unduly pressed or cultivated — affections allowed good scope — Educated at home — average English & slight French & musical Education

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No special occupation — habits temperate & conduct always temperate & regular
Never actively engaged in any special industry or occupation — had never much application

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 17 1/3 yrs. 2 children — Eldest 5 3/4 & youngest if living would be about 1 1/4 years — (latter premature)

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No —

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Measels — scarletina & childs consumption

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No hereditary predisposition supposed though Father a short time under treatment for mental derangement —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Shock to the mind & feelings —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

25½ years

15. What has been the duration of the present attack?

About 4 months though positive symptoms only apparent within a fortnight

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Great mental depression for 3½ mos — conduct reserved & melancholy sleep bad for latter few weeks — for over two years spine weak & congestion of womb known for about 5 months. —

19. What were the first decided symptoms of mental aberration?

Fear in the sufferer of taking her life or that of others

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Believes she is Eternally lost — most affected by speaking or thinking on subjects connected with morals — Enjoys & appears benefited by judicious discourse on religious topics

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has not made any attempt on self or others has thrown body & arms about once or twice requiring momentary restraint

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Speaks of drowning herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Nothing exceptional beyond inclination to cry out.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Enjoys good bodily health apparently

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never under care in either hospital or Asylum

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Hydropathy for congestion & spine with benefit but not cured — afterwards the Acetic acid treatment which appears the means of curing both spine & other symptoms & sinking at heart.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Disorder appears increasing — generally lucid — but always depressed — Generally worse after waking in morning & in early part of day. —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Francis Davis for
Kilcarbery Mills
Enniscorthy
Ireland

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Davis whom I last saw at The Queen's Hotel York on the twelfth day of October 1873 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Jane Davis.

Signed, *Name,* Francis Davis Jun

Occupation (if any), Flour Miller & corn merchant

Place of Abode, Kilcarbery Mills – Enniscorthy

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this Twelfth Day of October

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Jane Davis
Sex and Age	Female 25½ years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Not any
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Enniscorthy
Whether First Attack	Yes.
Age (if known) on First Attack	Between 25 & 26
When and where previously under Care and Treatment	Not any where
Duration of existing Attack	Two or three weeks
Supposed Cause	A Shock
Whether subject to Epilepsy	No.
Whether Suicidal	Supposed to be
Whether Dangerous to others	Speaks of it
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	~~Yes~~. No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	Not any.
Name and Address of Relative to whom Notice of Death to be sent	Francis Davis Junr Kilcarbery Mills Enniscorthy Ireland

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Margaret Moss.

Occupation (if any), Not any

Place of Abode, 5 Vergemount Clonskea

Degree of Relationship (if any), or other circumstance of connexion with the Patient Dublin Mother of Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Samuel William Nook
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the twelfth day of October 1873
at (c) The Queen's Hotel Micklegate York
in the County of York separately from any other Medical Practitioner,
personally examined Jane Davis wife of Francis Davis Jun
of (d) Enniscorthy Co Wexford Ireland and that
the said Jane Davis
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

^ Kilcarbery Mills

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
She believes that she has a devil — that voices support that she should destroy herself

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S W Nook
Place of Abode, Carthagena York
Dated this 12th day of October One Thousand Eight
Hundred and Seventy three

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, William Procter
being a (a) Member of the College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twelfth day of October 1873
at (c) The Queen's Hotel Micklegate - York
in the county of York separately from any other Medical Practitioner,
personally examined Jane Davis wife of Francis Davis Jun
of (d) Enniscorthy Co Wexford Ireland and that
the said Jane Davis
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She is depressed & melancholic - has fears of her salvation & fancies that she sees an evil spirit

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* J. Procter
Place of Abode, 24 Petergate - York
Dated this 12 day of Oct One Thousand Eight
Hundred and Seventy three

1220 Matilda Leeman

22/101

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership by convincement } not otherwise connected

2. Where was the place of birth of the patient?

Switzerland

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No means of knowing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

No means of knowing

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Evidently received a good education in Lucrative country

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Came to England I believe abt 5 yrs since as a French & German Governess — which since I have had any opportunity of knowing, she has pursued with industry & has been temperate & regular in her conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Not that we know of

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Not that we know of

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Hysteria

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Her ~~the~~ Father as informed by her

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Not aware of any

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

abt 22

15. What has been the duration of the present attack?

Since the 17th inst

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

The first that we know of

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

appeared depressed at intervals

19. What were the first decided symptoms of mental aberration? The first suspicions arose from an apparent excitement attending her feeling that it was her duty to preach, but it was then attributed to physical disorder

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

No particular delusion

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

destruction at times but has made no attacks upon the life of another

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

refuses food; has attempted to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Health bad - suffering frequent excitement

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Not that we know of

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Sent to Matlock for Change, under the advice of a medical attendant

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Symptoms increasing - subject to lucid intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

To Henry Brown as Clerk of Norwich Monthly Meeting

The Patient is an Orphan & has no Relations in this Country

22/10/73

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Matilda Leeman

whom I last saw at Matlock

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the third 22 day of 10 month 1873 (a)

a (b) person of unsound mind } as a Patient in your House.

Subjoined is a statement respecting the said Matilda Leeman

Signed, *Name,* Henry Brown

Occupation (if any), Grocer

Place of Abode, Unthanks Road Norwich

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Clerk to the Monthly Mg of Friends of which Matilda Leeman is a member — No Relationship

Dated this 22nd Day of 10 mo 1873

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Matilda Leeman
Sex and Age	Female - age believed to be 22
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Governess
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Norwich
Whether First Attack	we suppose so
Age (if known) on First Attack	22
When and where previously under Care and Treatment	at Norwich for physical ailment
Duration of existing Attack	5 days
Supposed Cause	not known
Whether subject to Epilepsy	no.
Whether Suicidal	no.
Whether Dangerous to others	no.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	no.
Name and Address of Relative to whom Notice of Death to be sent	no relative - Henry Brown Unthanks Rd Norwich

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Brown

Occupation (if any), Grocer

Place of Abode, Unthanks Road Norwich

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Nil relationship

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Josiah Cash being a (a) Licentiate of the Royal College of Physicians Edinburgh and Member of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the 21st day of October 1873 at (c) Miss Clara Stevens's Matlock Bank in the County of Derby separately from any other Medical Practitioner, personally examined Matilda Leeman Governess. of (d) For View Matlock Bank (at Miss Clara Stevens, For View) and that the said Matilda Leeman is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

I found her in a very excited state; she would not answer any questions I put to her; and was singing and talking in an incoherent manner.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

I was informed by Elizabeth Hartle of Matlock Bank
1st That she would tear the bed clothes
2nd That she tried to pull off her hair; and bite any one who went near her.

Signed, Name, Josiah Cash

Place of Abode, Bridge House Matlock

Dated this 22nd day of Octr. One Thousand Eight Hundred and Seventy three

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Robert Carr Brackenbury Holland being a (a) Doctor of Medicine of University of St Andrews and being in actual practice as a (b) Physician hereby certify, that I on the twenty second day of October 1873 at (c) Miss Stevens Matlock Bank in the county of Derby separately from any other Medical Practitioner, personally examined Miss Matilda Leemann of (d) For View Matlock Bank — Governess and that the said Miss Matilda Leemann is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

She sits with fixed expression & wild aspect — arms extended — hands clenched — eyes closed — refuses to answer any questions —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

By her attendant — Mrs Elizabeth Hartle of Matlock Bank — 1 That two days ago she dashed a plate of pudding on the floor — 2) That she said a black man was coming to fetch her last night & she clung in terror to her attendant
(3) She has tried to get out of the window

Signed, Name, R. C. B. Holland

Place of Abode, Oak House Matlock

Dated this twenty second day of October One Thousand Eight Hundred and Seventy three

1221 Phebe Malcolm

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?
A member, but not by birthright.

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
No

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
She was always industrious, temperate, and regular in her conduct.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Not married.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Two sisters

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Cause not known

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? about 50 years

15. What has been the duration of the present attack? Supposed to have been about 1 month

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Once, for three years

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? Refused to eat because she fancied she could not afford it.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

She fancies she is destitute, and is in constant dread of being arrested for some crime, what she thinks she is supposed to have committed.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She wishes to shorten her life by starvation.

23. What are the habits of the patient as regards personal cleanliness and decorum? Has been very cleanly in her habits

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. She was admitted into York Retreat in 1852 and remained there as a patient for seven years, and was supposed to be cured.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Robert Turnbull
19 Summerhill Grove
Newcastle on Tyne

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Phebe Malcolm

whom I last saw at 42 Grimscott St. Bermondsey, London

on the 4th day of November 1873 (a)

a (b) Person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Phebe Malcolm

Signed, *Name,* Marianne Turnbull

Occupation (if any), 19 Summerhill Terrace

Place of Abode, Newcastle on Tyne

Degree of Relationship (if any), or other circumstances of connexion with the Patient Niece

Dated this Fourth Day of November

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Phebe Malcolm
Sex and Age	Female, about 70 years
Married, Single, or Widowed	Unmarried
Condition of Life, and previous Occupation (if any)	Living on her annuity, previously a housekeeper
Religious persuasion, as far as known	A member of the society of Friends
Previous Place of Abode	42 Grimscott St. Bermondsey, London.
Whether First Attack	Second
Age (if known) on First Attack	About 50 years
When and where previously under Care and Treatment	At York Retreat.
Duration of existing Attack	About 1 month
Supposed Cause	Cause not known
Whether subject to Epilepsy	No.
Whether Suicidal	Not at present
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Marianne Turnbull Newcastle on Tyne.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Marianne Turnbull

Occupation (if any), 19 Summerhill Terrace

Place of Abode, Newcastle on Tyne

Degree of Relationship (if any), or other circumstance of connexion with the Patient Niece

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John M. Marshall

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons of England

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

(c) Here insert the street and number of the house (if any), or other like particulars

hereby certify that I, on the 4th day of November 1873

at (c) 42 Cornwall Street, Bermondsey

in the County of Surrey separately from any other Medical Practitioner,

personally examined Phebe Malcolm

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) 42 Cornwall St Bermondsey and that

the said Phebe Malcolm

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)
Patient seen more & not inclined to enter into Conversation, says that the Government is going to take her money away from her & spoke. She also says that she is ill treated & cannot eat because she cannot afford it.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Per Lucas Marcia Turnbull & Margaret Ross inform me that she has been confined in an asylum twenty one years ago as a patient, that she has had two sisters out of their minds. They also tell me they she will not eat unless obliged.

Signed, Name, J Marshall

Place of Abode, 158 Grange Road, Bermondsey

Dated this 4th day of November One Thousand Eight Hundred and Seventy three

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Hall Turner

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons & Licentiate of Apothecaries Hall London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon & Apothecary

(c) Here insert the street and number of the house (if any), or other like particulars.

hereby certify, that I on the 3rd day of November

at (c) 42 Cornwall St Bermondsey

in the county of Surrey. separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Phebe Malcolm.

of (d) ~~Cornwall~~ 42 Cornwall St

and that

the said Phebe Malcolm

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) The Statements of the Nurse that she was found in a Kitchen with no companion but a dog without the Knife in a Cupboard which she was found to be removed on account of her Conduct as she is in comfortable circumstances & takes this is being unable, under the influence of some unknown but not contrary Spirit very little command of herself.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)
her sister tells me she wanted about arranging her Account in some trouble & expecting some person to come from Newgate to take her for debt.

Signed, Name, Wm. Hall Turner

Place of Abode, Bermondsey Square

Dated this 3rd day of Nov. One Thousand Eight Hundred and Seventy three

1222 J. R Penrose

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?
He is not a member by birth right

2. Where was the place of birth of the patient? Jacobstow — Devon

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Delicate from weakness of the Bowels

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
A strong mental understanding — no eccentricity very affectionate disposition both passionate when roused but not easily

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Instructed by his parents & a kind governess a speak decision for information but did not learn to read fluently until 6 years of age when told the time was come for him to read for himself he applied himself and did so quickly he was at School several years under the Revd Henry Thos & profited the Cambridge Middle Class examination with credit

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. He was taken from School into an office for 2 years into a Laboratory having a taste for Chemistry & Mineralogy he made good progress & was much valued there

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? His Various Studies were pursued all he undertook was pursued with great earnestness often beyond his Physical Strength —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Prior to the failing of health from time to time — he had to give up the bright prospects & especially the last situation at Ashton in Sadleworth he had to return home in very shattered State of health about 2 years since when from the advice of his Brother in Law Wm Wade a few days before he was taken from home

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No
On his return from Sadleworth he suffered from Spasmodic Asthma — Severe cold Loss of Sleep in the Town considered to be from Change of climate

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Had a slight attack of Scarlet fever many years since from which he soon recovered — Consulted Dr Holland in London, considered his Nervous System was not strong, but he must take exercise & not study too much

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No Hereditary disease that I know of — Alfred Penrose who for some years was under my care for a short time & has been well some hopes to his Father

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? A high degree of Nervous Susceptibility from time to time when an object took Nothing became my pressing until last April — & that soon passed off under the care of his Medical Attendant Dr Planes —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Sleeplessness & inability to read &c

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. This attack came on [illegible] & the Lord would sustain him without food until he had done what he believed right — he was notwithstanding every effort on my part & his friends and medical advisers persistent in refusing food for many days when he consented to take nourishment & food he always tried to place it where he would be obliged to receive it — often to his difficulty & distress to eat but he stated before his usual food — to try & obtain life —

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? We have reason to believe that he took steps by poison more than one to hasten his end —

23. What are the habits of the patient as regards personal cleanliness and decorum? very particular with regard to personal cleanliness & decorum in every respect and thankful courteous to all; ready to ask for prayer if he thought he had sinned in any word

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. His bodily health has much improved & date — I believe his digestive powers have been much injured by his taking his food too hastily

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. He has been not under care until he went to Ely Asylum

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? Dr Bowen & C Battcock

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? this report I send free on the above heads believing it may help those who are to try & care for

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

I am responsible for the quarterly payments Please send the A/c to me —

Ely the Rectory

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive My Son John Roberts Penrose

whom I last saw at Plympton Asylum

on the ~~[illegible]~~ day of Eleventh Month (a) Elizth Penrose

a (b) as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said J R Penrose

Signed, *Name,* Elizth Penrose

Occupation (if any), Agent L

Place of Abode, 74 Dartford Street Stonehouse

Degree of Relationship (if any), or other circumstances of connexion with the Patient Elizth Penrose Widowed Mother

Dated this Day of

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any).....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment ....

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent .....

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name*,

Place of Abode,

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name*,

Place of Abode,

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 25th day of November 1873, of John Roberto Penrose a Private Patient in Plympton House, Plympton to The Retreat House, York

Given under our hands this 10th day of November in the year of Our Lord One Thousand Eight Hundred and Seventy-three

James Wilkes
Robert Nairne
Commissioners in Lunacy.

ORDER.

I,* Elizabeth Penrose the undersigned having Authority to discharge John Roberto Penrose a Private Patient in Plympton House, Plympton

hereby order and direct that the said John Roberto Penrose be removed therefrom to The Retreat, ~~House,~~ York

Given under my hand this* 11th day of 11th Month in the year of Our Lord One Thousand Eight Hundred and Seventy-three

(Signed) Eliz-th Penrose

Place of Abode 74 Dunford Street Stockwell

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person who *signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband* or *Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person who made *the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
283—(133)

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16 AND 17 VICTORIA, c. 96, AND 25, AND 26, VICTORIA, c. 111.

Plympton House Asylum, Plympton, near Plymouth.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

I, the undersigned, hereby request you to receive John Robarts Penrose whom I last saw at 74 Durnford Street Stonehouse Devon on the 19th day of October 1873 (a) a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said John Robarts Penrose

Signed, Name, Elizth Penrose

Occupation (if any) Gentlewoman

Place of Abode 74 Durnford Street Stonehouse Devon

Degree of Relationship (if any), or other circumstances of connexion with the Patient, Mother

Dated this 19th day of October One Thousand Eight Hundred and 73

To Dr. Aldridge, Physician and Proprietor of Plympton House Asylum, Plympton, near Plymouth.

STATEMENT.

If any particulars in this Statement be not known, the facts to be so stated.

Name of Patient, with Christian Name at length	John Robarts Penrose
Sex and Age	Male at 28
Married, Single, or Widowed	Single
Condition of Life, and previous occupation (if any)	Practical Chemist
The Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	74 Durnford Street Stonehouse
Whether First Attack	has several times shewn symptoms of unsoundness of mind but has never required detention.
Age (if known) on First Attack	First shewed symptoms 2 or 3 years ago
When and where previously under care and treatment	Only at home
Duration of existing Attack	6 days
Supposed cause	Unknown, had brain fever 6 or 7 years ago
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special circumstances (if any) preventing the Patient being examined, before Admission, separately, by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death is to be sent	Mr Penrose 74 Durnford Street Stonehouse Devon

Signed, Name, Elizth Penrose

These Particulars to be added when the Person signing the Statement is not the Person who signs the Order.

Occupation (if any) Gentlewoman

Place of Abode, 74 Durnford Street Stonehouse Devon

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother

(a) The order must be dated within one month prior to the reception; the person signing the order must himself have seen the Patient within one month prior to its date.

(b) Lunatic, or an Idiot, or Person of Unsound Mind.

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FORM OF MEDICAL CERTIFICATES. Sched. (A) &c.

The examination to be made and the Certificate signed by two Physicians, Surgeons, or Apothecaries (who shall not be in partnership, or one of them an assistant to the other, or either of them related to the Patient), NOT MORE THAN SEVEN CLEAR DAYS previous to the reception of the Patient.
No Patient can be legally admitted under any Certificate which purports to be founded only upon facts communicated by others.

I, the undersigned, being a (1) Member of the Royal College of Physicians in London and being in actual practice as a (2) Physician hereby Certify that I, on the 18th day of October 18 73 at (3) 74 Durnford Street Stonehouse in the County of Devon separately from any other Medical Practitioner, personally examined (°) John Roberts Parrow of (4) 74 Durnford St Stonehouse Devon Here state occupation (5) Practical Chemist and that the said (°) John Robert Parrow is (6) Person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

1.—Facts indicating Insanity observed by myself, especially at the time of examination.

Have frequently observed him during the last 2 or 3 years when he has manifested symptoms of unsoundness of mind at times. Recently he has been labouring under the delusion that he was to take food or drink, as he is absolutely changed in size & he has left off eating & drinking. The question & arguments on subjects, & name of the relations will induce him to touch any food or medicine, he is capable, practical and talking speaker, but maintains that he is really better and stronger, and that God will give him strength & do his will. I think he has diverse intimations for Menheniot Cornwall, though he has a real object for

2.—Other Facts (if any) indicating Insanity, communicated to me by others, giving the names of the Informants.

His mother Elizabeth Parrow & his sister Julia Robert Parrow tell me that they have used strong entreaty & continually brought him food or drink but he persistently refuses to eat anything believing it would be a sin, that when they spoke him of getting better he replied a total to demonstrate that it was not so. He has not taken any food or drink with the exception of three small biscuits since Oct 4th Last

Signed, Name Charles R Prance M.D. M.R.C.P.L.

Place of Abode, 18 Princess Square Plymouth Devon

Dated this 19th day of October One Thousand Eight Hundred and 73

I, the undersigned, being a (1) Fellow of the College of Surgeons of England and being in actual practice as a (2) Surgeon hereby Certify that I, on the 19th day of October 18 73 at (3) 74 Durnford Street Stonehouse in the County of Devon separately from any other Medical Practitioner, personally examined (°) John Robert Parrow of (4) 74 Durnford Street Stonehouse Devon Here state occupation (5) Practical Chemist and that the said (°) John Robert Parrow is (6) Person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

1.—Facts indicating Insanity observed by myself, especially at the time of examination.

He positively refuses to take any food or drink and says that he has had an intimation from a higher power that his bodily strength will be sustained without food

2.—Other Facts (if any) indicating Insanity communicated to me by others, giving the names of the Informants.

His Mother Elizabeth Parrow and his sister Julia Robert Parrow told me that he has taken no food whatever since Tuesday Oct 4th four days ago and that he has an impression that he ought to go immediately to Menheniot, Cornwall for which there is no reason whatever

Signed, Name, Christopher Bullen F.R.C.S.L

Place of Abode, 62 Durnford Street Stonehouse Devon

Dated this 19 day of October One Thousand Eight Hundred and 73

(1) A Fellow or Licentiate of the Royal College of Physicians, in London; or a Graduate in Medicine of the University of ——, &c.; or Member or Fellow of the Royal College of Surgeons of England; or Licentiate of the Society of Apothecaries.
(2) Physician, Surgeon, or Apothecary. General Practitioner is not to be used as it is not a statutable term.
(3) Here insert the street, number of the house (if any), or other like particulars.
(4) Insert Residence in full.
(5) Here state Occupation.
(6) A Lunatic, or an Idiot or a person of Unsound Mind.
(°) Name in full.

As a correct History of the case of each Patient is of importance in directing the early treatment after admission into the Asylum, Dr. ALDRIDGE particularly requests that one of the Certifying Medical Men, or the Person best acquainted with the Insane Patient, will answer the following questions:—

History

1.—Has he any children? How many? .....

2.—What is the degree of Education? .....

3.—Has any relation or family connection been known to be Insane, or Weak Minded, or Eccentric? .....

4.—If not the first attack, how often, when, and for how long a period has he been previously affected, and what was then the character of the complaint? .....

5.—Were there before this attack any such symptoms as the following observed:—unusual depression or elevation of Spirits, remarkable alteration in the Temper, Disposition, Feelings, Opinion, Conduct, Sleep, Appetite, state of Bowels or Health of the Patient, and how long before the attack? .....

6.—What have been the chief symptoms of the Malady? Is the Patient Violent or Depressed or Idiotic? Have any lucid intervals or other obvious changes in the disease occurred? .....

7.—Does he rave indifferently on various subjects or chiefly on one, and what is that subject? Mention particularly any permanent or remarkable illusions? .....

8.—Is he prone to tear clothes, break windows or furniture, or has he any other mischievous propensity? .....

9.—What have been h habits since the attack? State particularly, whether the Patient is attentive to the calls of nature? .....

10.—Has he always been temperate and industrious? Has he led an active or sedentary life? .....

Cause

11.—Has he at any time undergone any serious disappointment or reverse, pecuniary or otherwise? .....

12.—What circumstances are supposed to have caused the mental disorder? .....

13.—Before the commencement of the malady, was the Patient remarkable for any degree of Oddity, Eccentricity, or Mental Infirmity? Mention particular Passions or Prejudices, Religious Impressions, and any Habitual Vice or Intemperate Habits .....

14.—Is the Patient subject to periodical attacks of any other disease; to any unusual discharge; to suppression or obstruction of any customary discharge; to Sores, Eruptions, Epilepsy, or Palsy? Specify any bodily infirmity or disease of the Patient .....

15.—Did the present or any former attack occur during pregnancy or in childbed? .....

16.—Was the head or spine of the Patient ever seriously injured? ....

Treatment

17.—What Medical or other remedies have been used for the recovery of the Patient and with what effect? .....

18.—Has the Patient been treated for Insanity in any Public or Private Asylum, if so, how often and for how long on each occasion; when, in what state, and for what reason was he discharged? ..

Signed, ...

Place of Abode, ...

Dated ..... 18 .....

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NOTICE OF ADMISSION.

Sched. C.—Sec. 24.

I hereby give you Notice, That Mrs Robert Penrose was admitted into this House as a Private Patient on the 19th Day of October 1873, and I hereby transmit a copy of the Order and Medical Certificate on which he was received (a)

(a) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated as in the statement accompanying the order for admission.*

Signed Charles Aldridge M.B.

Physician and Proprietor of Plympton House Asylum, at Plympton.

Dated this 21st day of October
One Thousand Eight Hundred and 73.

To the Magistrates & Commissioners in Lunacy

I hereby certify that the above is a true copy of the Order and Medical certificates upon which Mrs Robert Penrose was received and I further that she is in a fit state of bodily health for removal

Plympton House
Nov 11th 1873.

Charles Aldridge M.B.
Physician & Proprietor

~~1208~~ Eleanor Long
1223

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Miss Eleanor Long

whom I last saw at Settington

on the eighth day of April (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Eleanor Long

Signed, *Name,* Charles M. Long

Occupation (if any), Clergyman

Place of Abode, Settington

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this 12th Day of April

One Thousand Eight Hundred and Seventy three

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Eleanor Long
Sex and Age	Female 28
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	Protestant Church of England
Previous Place of Abode	Settington Rectory
Whether First Attack	No considered second by relatives
Age (if known) on First Attack	26
When and where previously under Care and Treatment	From April to August 1872 in charge of a lady under Dr Reynolds supervision in London
Duration of existing Attack	Six weeks
Supposed Cause	Uterine disorder
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	Has threatened violence to a nurse
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Revd. C. M. Long Settington Rectory

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Charles M. Long

Occupation (if any), Clergyman

Place of Abode, Settington

Degree of Relationship (if any), or other circumstance of connexion with the Patient Father

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Robert T. E. B. Cooke
being a (a) Physician Licentiate of the Royal College of Physicians & Fellow of the Royal College of Surgeons - Edin -
and being in actual practice as a (b) Physician
hereby certify that I, on the Eleventh and Twelvth day of April 1873 —
at (c) 28 Crescent. Filey
in the County of York separately from any other Medical Practitioner,
personally examined Eleanor Long
of (d) Settrington, Spinster and that
the said Eleanor Long
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Beating on the fire irons, - Cutting off her hair - stating that she had been seen by a "Lunatic Commissioner" — and when asked by whom stating that it was a "professional secret"

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Burning her things (articles of Clothing, Jewels) - destroying her watch. desiring that a favorite Parrot should be destroyed or made away with by the Butter - "as it was an unholy thing" - making grimaces - delusions - Burning her hair.

This information was obtained from her Brother Capt Saml Long, her sister Mrs Jane Long — and from Mrs Gertrude Nevill -

Signed, *Name,* Robert T. E. B. Cooke
Place of Abode, 15 S. Nicholas Cliff Scarboro'

Dated this Twelvth day of April One Thousand Eight Hundred and Seventy three

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, James Haworth
being a (a) Member of the Royal College of Surgeon and Licen^t Faculty of Physicians & Surgeons
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Twelvth day of April 1873
at (c) Crompton House - Filey
in the county of Yorks separately from any other Medical Practitioner,
personally examined Eleanor Long
of (d) Settrington - Mr Malton and that
the said Eleanor Long
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherancy conversation rambling - directing letters for one party - when intended for another person

(g) *Here state the information, and from whom.*

Information obtained from Capt Saml Long

2. Other facts (if any) indicating Insanity communicated to me by others (g) disposition to destroy articles - An unholy thing to have a parrot in the house - also believes she is a Roman Catholic but still remain a member of the Church of England

Signed, *Name,* James Haworth
Place of Abode, Crompton House. Filey

Dated this 12th day of April One Thousand Eight Hundred and Seventy three

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No -

2. Where was the place of birth of the patient? Whitchurch Salop

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
of ordinary ability & quiet disposition. No peculiarities

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Yes. she received the ordinary education of an English lady at home -

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
To no occupation, care of her fathers house & parish work industrious, temperate, & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
No -

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has her conduct ever exhibited a strong bias in any direction? No -

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No Her maternal grandmother shewed symptoms of brain disease at a late period of life.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
1st att. Remote causes unknown, imm. cause supposed to be bodily derangement.
2d The present seems to be a relapse but her regular medical att. Mr Hartley thinks she never has been thoroughly well

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 26 . 3

15. What has been the duration of the present attack? six weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Began February 1871 & lasted with intervals until August 1872 for 18 months ~~[illegible]~~ varied from passive melancholy to active violence

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

No

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Yes. was very positive & dictatorially and her physical health visibly affected

19. What were the first decided symptoms of mental aberration? Thought she was dying of pleurisy & other disorders which had no existence

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Her mind has been principally occupied with religious subjects especially the Roman Catholic faith as evidenced by her sending an iron cross to the pope as a present

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Apt to destroy anything, has not attacked anyone

22. Has the patient shown any disposition to refuse food, or to injure ~~himself~~ herself, and if so, in what way?

Yes. Has attempted to stab herself, to drown herself & to burn herself. The two first at Rome in 1872

23. What are the habits of the patient as regards personal cleanliness and decorum?

Nothing to be specially remarked

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

The Catamenia have been regular — but deficient in quantity.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never in any public or private asylum, but was in private charge (under the care of Dr Russell Reynolds) in London

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

She was under medical treatment by Dr Russell Reynolds, Dr Blandford Dr Pantaleoni (in Rome) — and Wm Hartley at Halton.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Appears to be steadily getting worse — aggravated occasionally — especially when the friends and attendants refuse to leave her alone

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Venble Archdeacon Long
Settrington Rectory
S. Long
Commr [illegible]

1224 Jane Ward

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? By Birthright & Membership

2. Where was the place of birth of the patient? Glanyr Road Bermondsey,

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing particular

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Educated at Sidford & Ackworth

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Teaching Particularly Quiet & Moderate

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Single

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Fond of Study & Religious Meditation

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Weakness of Constitution of late Years

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Hereditary on Mother's Side

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Bodily Suffering

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 32

15. What has been the duration of the present attack? 4 days & Nights

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing particular observable

19. What were the first decided symptoms of mental aberration? Singing at night

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Imaginary visions of Religious Nature

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

To refuse food & Medicine only

23. What are the habits of the patient as regards personal cleanliness and decorum?

Extremely neat & orderly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Irritation of spine & General Debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Best Medical Advice No satisfactory result

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and, if so, do such changes occur at uncertain times, or at stated periods?

First attack but showing symptoms of reappearance

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent? ~~Mr Frederick Patching Worcester St Birmingham~~.

Edwin Laundy
Treasurer Birmm Preparative Meeting

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Jane Ward

whom I last saw at 112 Manor St Clapham London

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 19th day of Jan[y] (a)

a (b) Person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Jane Ward

Signed, *Name,* Sarah Hayden Ward

Occupation (if any), Saleswoman

Place of Abode, 7 Park Crescent Clapham

Degree of Relationship (if any), or other circumstances of connexion with the Patient Sister

Dated this 19 Day of Jan[y]

One Thousand Eight Hundred and Seventy 4

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Jane Ward
Sex and Age	Female 32
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Governess
Religious persuasion, as far as known	Thorough Friend
Previous Place of Abode	Tirining Hall
Whether First Attack	Yes
Age (if known) on First Attack	
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	4 days & Night
Supposed Cause	Genital Debility
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	Have been seen by both Mr J Watling Tirining Hall
Name and Address of Relative to whom Notice of Death to be sent	

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Sarah H Ward

Occupation (if any), Saleswoman

Place of Abode, 7 Park Crescent Clapham

Degree of Relationship (if any), or other circumstance of connexion with the Patient Sister

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Eugene F Cronin
being a (a) Doctor of Medicine & Surgeon (M.R.C.S. Eng.)
and being in actual practice as a (b) General practitioner
hereby certify that I, on the Twelfth & Thirteenth and Twenty Fourth days of January 1874
at (c) 112. Manor St. Clapham – Surrey
in the County of Surrey separately from any other Medical Practitioner,
personally examined Jane Ward
of (d) 112. Manor St Clapham – Surrey Governess – and that
the said Jane Ward
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Paroxysms of extreme violence, requiring restraint – loud shouting & singing – with constantly repetition of Scripture language – in an excited & violent manner – refusing food – constant restlessness & insomnia —

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

By Mrs Mrs Caroline Sadler – 112. Manor St. She insisted upon Mrs Sadler writing an acct. of visions – seen by her, & of violent & unseemly conduct on several occasions – That on 11th inst: she found a knife open & secreted by said Jane Ward – the removal of which caused her gt. excitement.

Signed, *Name,* Eugene F Cronin
Place of Abode, 31. Old Town, Clapham, Surrey

Dated this 26th day of January One Thousand Eight Hundred and Seventy Four.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Joseph Alfred Tapson
being a (a) Surgeon in General Practice ~~(Member of Royal College of Surgeons)~~
and being in actual practice as a (b) General Practitioner
hereby certify, that I on the Nineteenth day of January
at (c) 112 Manor Street Clapham
in the county of Surrey separately from any other Medical Practitioner,
personally examined Jane Ward – Governess
of (d) 112 Manor Street Clapham and that
the said Jane Ward
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Vacuity of manner, inability to answer questions collectedly, delusions on religious subjects, excitement of manner &c, &c, at times violent.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Informed by Caroline Sadler of 112 Manor Street, that she has been so violent as to require restraint; – that she has refused to take food, and

Signed, *Name,* Joseph Alfred Tapson
Place of Abode, 83 High Street – Clapham

Dated this 19th day of January One Thousand Eight Hundred and Seventy four.

1225 Louisa Rule

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL* CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In Membership by Convincement

2. Where was the place of birth of the patient?

Markeley Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Nothing remarkable

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Of ordinary qualities of Mental power

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Educated in private boarding School under competent persons

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Domestic duties, gardening always regular in conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Single person

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No particular bias some religious earnestness

9. Has any material change taken place in the pecuniary circumstances of the patient; or has she been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Has some trials of a family nature

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Had severe attacks of illness about the age of 23 –

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Has some hereditary claim

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

No immediate cause is traceable.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Sixty four her present age

15. What has been the duration of the present attack?

Sort of five days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

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18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Sleepless & depressed with alternations of Excitement

19. What were the first decided symptoms of mental aberration?

Being watched & poisoned

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The mind is affected on most subjects
Religion the prominent one

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

Signs of self destruction have manifested themselves

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Takes food with hesitation & spits it out again

23. What are the habits of the patient as regards personal cleanliness and decorum?

Perfectly normal

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Dyspeptic and debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never in any asylum

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

None

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

To increase

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Osmond Reynolds
Silversmith
Sittingbourne
Kent

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Louisa Rule

whom I last saw at Pemberton Place on the Seventh day of first month (a) 1874

a (b) Lunatic as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Louisa Rule

Signed, *Name,* Edmond Reynolds,
Occupation (if any), Silversmith
Place of Abode, Tillingbourne Vale
Degree of Relationship (if any), or other circumstances of connexion with the Patient Brothers-in-law

Dated this ~~20th~~ Seventh Day of First month
One Thousand Eight Hundred and Seventy 4

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Louisa Rule
Sex and Age	Female fourty four years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Occupied in household duties
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Pemberton Place Milton
Whether First Attack	First
Age (if known) on First Attack	44 present age
When and where previously under Care and Treatment	—
Duration of existing Attack	4 or 5 days
Supposed Cause	Undiscernable
Whether subject to Epilepsy	Not
Whether Suicidal	Some tendency
Whether Dangerous to others	uncertain
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Edmond Reynolds,

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Edmond Reynolds,
Occupation (if any), Silversmith
Place of Abode, Tillingbourne
Degree of Relationship (if any), or other circumstance of connexion with the Patient Vale Brother-in-law

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned John Gragling
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon &c
hereby certify that I, on the thirteenth day of January
at (c) No 1 Pemberton Place Milton
in the County of Kent separately from any other Medical Practitioner,
personally examined Louisa Rule
of (d) No 1 Pemberton Place Spinster and that
the said Louisa Rule mind
is a (e) Person of unsound and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Says she is watched by people with the view to poison her people spit upon her at the station and otherwise prevents her with irrational talk about events & things having no possible coherence

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Osmond Reynolds states that she gets worse and more confused in her ideas & deeples with mistake of meaning & religious importunity, shewing a tendency to some "overt act" and now quite beyond the control of her relatives

Signed, Name, John Gragling M. D.
Place of Abode, Sittingbourne Kent

Dated this thirteenth day of January One Thousand Eight Hundred and Seventy four

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Charles Holdrich Fisher
being a (a) a member of the Royal College of Surgeons of England and a Licentiate of the Society of Apothecaries
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty ninth day of January 1874
at (c) 1 Pemberton Place Milton
in the county of Kent separately from any other Medical Practitioner,
personally examined Louisa Rule
of (d) 1 Pemberton Place Milton and that
the said Louisa Rule
is a (e) Person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Believes that the porters at the Railway Station have tryed to make her a Roman Catholic, that they yelled after her and tryed to spit upon her

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her brother in Law, Osmond Reynolds, states that she believes she has been poisoned, and that one of her relatives have tryed to commit murder

Signed, Name, C H Fisher M D
Place of Abode, Sittingbourne Kent

Dated this twenty ninth day of Jan 7 One Thousand Eight Hundred and Seventy four.

1226
~~1225~~ Margaret Knight

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
(was Paralytic)

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
An uncle was insane

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Lewis J. Knight

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Margaret Knight

whom I last saw at Manchester

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 25th day of feby 1874 (a)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Margaret Knight

Signed, *Name,* Lewis S Knight

Occupation (if any), General Dealer

Place of Abode, 38 Oak Street Manchester

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this 25th Day of feby

One Thousand Eight Hundred and Seventy 4

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Margaret Knight
Sex and Age	female 42 years
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	no occupation
Religious persuasion, as far as known	"friend"
Previous Place of Abode	Lymm Cheshire
Whether First Attack	not the first
Age (if known) on First Attack	32 years
When and where previously under Care and Treatment	at the Retreat 1864 since which she has not been in confinement but in consequence of ill health and epileptic fits she has lastly lodged in the country at Lymm
Duration of existing Attack	several years
Supposed Cause	unknown
Whether subject to Epilepsy	yes
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	Lewis S Knight 38 Oak Street Manchester

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Lewis S Knight

Occupation (if any), General Dealer

Place of Abode, 38 Oak Street Manchester

Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Charles Harrison Blackley being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify that I, on the Seventeenth day of February at (c) Crumbly Lane Farm Lymm in the County of Chester separately from any other Medical Practitioner, personally examined Mrs Margaret Knight of (d) Crumbley Lane Farm Lymm and that the said Mrs Margaret Knight is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f). Her excitability and eccentric manner. Her detailing to me domestic matters of a private character before I had been five minutes in her company. The use of a wash hand bowl for a chamber utensil in her sitting room. Insisting on giving me her address and having mine in return. The exhibition of all her private letters to me &c. &c.

2. Other facts (if any) indicating Insanity communicated to me by others (g) A perfect stranger Mrs Lowson of Crumbley Lane Farm Lymm who is the woman with whom she lives says she is very quarrelsome and excitable and has once or twice struck her in the face.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Signed, Name, Chas H Blackley

Place of Abode, Armley House Stafford Road Levenshulme

Dated this Twenty first day of February One Thousand Eight Hundred and Seventy four

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Thomas Rayner being a (a) Doctor of Medicine & Licentiate of the College of Physicians of Edinburgh & Member of the Royal College of Surgeons and being in actual practice as a (b) General Practitioner hereby certify, that I on the Eighteenth day of February 1874 at (c) 116 Portland St Manchester in the county of Lancaster separately from any other Medical Practitioner, personally examined Mrs Margaret Knight of (d) Crumbley Lane Farm - Lymm - and that the said Margaret Knight is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) She is excessively excitable almost boisterous at times, & when in my presence Mrs Lowson, with whom she lives made an statement the contradicted with violent gesticulations & passed words & struck her. She is not cleanly in her habits & told me that she had been of an warm bath one day, when in bed, instruments of a baptism & whilst not quite herself has been with it & whilst she finds very beneficial. Mrs Lowson complains of having the bed wetted. After the chloroform exposure she kept the room 'queer things' & at times behaves like boy sent out with her sometimes to object to go consequently she has to threaten worse than she wishes.

2. Other facts (if any) indicating Insanity communicated to me by others (g) - Mrs Lowson of Crumbley Lane Farm Lymm - says she is moderately in her habits & expects to have part her bath & sometimes (to a great extent) not when washing in the room with the any liquid they keep coals by nature her specimen of passers by, even that she is unfit & unclean & careless & then in the afternoon of her person & for her demeanour on conversation before strange men. She has a great desire to ramble about her neighbourhood gossiping & telling all her concerns most freely.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Signed, Name, Thomas Rayner

Place of Abode, 405 Oxford St Manchester

Dated this Twenty first day of February One Thousand Eight Hundred and Seventy four.

1227 Edward Richardson

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Was born a member but resigned & joined Church of England.

2. Where was the place of birth of the patient?

I think Newcastle Tyne

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

I really do not know but think not

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Always a little eccentric & original & very great determination & obstinacy

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Had very advantage of Education - best of parents, then York School, then studies in Paris

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Manufacturing Chemist - conduct outwardly at least fairly temperate & regular.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Never married - had his appointment

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

I believe [illegible] a romantic kind in France, but he never took any one so far as I know into his confidence

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No I think not - always fond of Literature & Classics & Observation

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No, I think not.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

I do not know of any.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

I think not.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Until further notice
me
John Wigham Richardson

In reply to queries 13-27 I think patient began to show symptoms about 1867 when his business affairs became involved - He was however always seen as a bad peculiar to some extent

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Edward Richardson whom I last saw at 3 Lorraine Place, Newcastle upon Tyne on the Third day of April (a) 1874 a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Edward Richardson

Signed, *Name,* George Hare Philipson
Occupation (if any), Physician
Place of Abode, 1 Saville Row, Newcastle upon Tyne
Degree of Relationship (if any), or other circumstances of connexion with the Patient Friend

Dated this Ninth Day of April ~~18~~
One Thousand Eight Hundred and Seventy four –

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Edward Richardson
Sex and Age	Male – born June 1835 (?)
Married, Single, or Widowed	Single –
Condition of Life, and previous Occupation (if any)	Gentleman –
Religious persuasion, as far as known	Friends –
Previous Place of Abode	3 Lorraine Place, Newcastle upon Tyne
Whether First Attack	First attack –
Age (if known) on First Attack	
When and where previously under Care and Treatment	no – where –
Duration of existing Attack	three weeks –
Supposed Cause	intemperance –
Whether subject to Epilepsy	no –
Whether Suicidal	no –
Whether Dangerous to others	yes –
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no –
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none –
Name and Address of Relative to whom Notice of Death to be sent	J. Higham Richardson – Wingrove House Westgate Road Newcastle upon Tyne

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) George Hare Philipson
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned E. F. Broadbent
being a (a) F. R. C. S. L.
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 10th day of April 1874
at (c) the White Swan Hotel No 274 High St. Lincoln
in the County of Lincoln in the County of the said city separately from any other Medical Practitioner,
personally examined Edward Richardson an independant gentleman
of (d) 3 Lovaine Place Newcastle upon Tyne and that
the said Edward Richardson is a person of unsound mind
is a (e) and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) States that he always carries a loaded revolver in his pocket, as every respectable man does at Newcastle threatens the life of the superintendant of police, or any other person who offends him.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Dr George Hare Philipson of Newcastle upon Tyne inform me that he imagines himself a member of Parliament for the above mentioned borough of Newcastle on Tyne. that he rides about the country with a revolver in one hand, & a hunting whip in the other

Signed, *Name,* Ed: Farr Broadbent
Place of Abode, Lincoln
Dated this 10th day of April One Thousand Eight Hundred and Seventy four.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) *Here state the facts.*
(g) *Here state the information, and from whom.*

I, the undersigned, W. J. Lomax
being a (a) Surgeon. M. R. C. S. Eng.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the 10th day of April 1874
at (c) No 274 High St Lincoln
in the county of Lincoln separately from any other Medical Practitioner,
personally examined Edward Richardson, a private gentleman
of (d) 3 Lovaine Place Newcastle on Tyne and that
the said Edward Richardson is a person of unsound mind
is a (e) and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
States that he is going to bring that beast the Constable before the Magistrates & will furnish me with a printed statement of particulars

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Dr G H Philipson has informed me that he is in the habit of riding to gentlemens houses in the County of Northumberland with a loaded revolver in his hand

Signed, *Name,* William John Lomax
Place of Abode, Lincoln
Dated this 10th day of April One Thousand Eight Hundred and Seventy four.

1228 H Rees

1228

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

13/4/74

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No.

2. Where was the place of birth of the patient?

Little Fenton Yorks.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Typhus Fever.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 50 Years

15. What has been the duration of the present attack? Near 3 Years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Frequent Pains in Head & Sleepless Nights

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Fancying done a great deal of harm & blaming herself for what she is not guilty of.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Shaking herself & others at times

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Knocking her head with her fist & against the Wall

23. What are the habits of the patient as regards personal cleanliness and decorum?

Untidy Hair

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Constantly Rifling & Picking after her food.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

1841/42 At the Retreat. York for near 12 Months. Very nice to manage.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Seems to be a Return Attack.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Andrew Heuser
39 Stonegate
York

or 3 Mount Terrace
York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive ~~I~~ Hannah Kleiser

whom I last saw at 39 Stony gate

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 13 April 1874 day of (a)

a (b) Person of unsound Mind as a Patient in your House.

Subjoined is a statement respecting the said Hannah Kleiser

Signed, *Name,* Andrew Kleiser

Occupation (if any), Publishing 39 Stone gate

Place of Abode, York

Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this 13 Day of April

One Thousand Eight Hundred and Seventy 4

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length ... Hannah Kleiser

Sex and Age ... Female 53 years of Age next July

Married, Single, or Widowed ... Married

Condition of Life, and previous Occupation (if any) ... Nothing of late

Religious persuasion, as far as known ... Roman Catholic

Previous Place of Abode ... 3 Monk Terrace and 39 Stone gate

Whether First Attack ... No 2nd

Age (if known) on First Attack ... 50 Years

When and where previously under Care and Treatment ... The Retreat York 1871

Duration of existing Attack ... About 2 Weeks

Supposed Cause ... Not known

Whether subject to Epilepsy ... Not known

Whether Suicidal ... Not apprehended of late

Whether Dangerous to others ... Striking others

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition ...

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners ...

Name and Address of Relative to whom Notice of Death to be sent ... Andrew Kleiser 39 Stone gate York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Andrew Kleiser

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Reed
being a (a) Member of the Royal College of Surgeons
and being in actual practice as a (b) Surgeon
hereby certify that I, on the Thirteenth day of April
at (c) 39 Stonegate
in the ~~County~~ City of York separately from any other Medical Practitioner,
personally examined Hannah Kleiser
of (d) 39 Stonegate and 3 Mount Terrace and that
the said Hannah Kleiser
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) Great mental irritability
Says that the Family are all ruined - burst out into fits
of swearing & has no control over her actions

2. Other facts (if any) indicating Insanity communicated to me by others (g) is violent
towards her Nurse and attempts her person. This was
stated to me by her husband Mr Kleiser

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an Idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Wm Reed
Place of Abode, 14½ Blake Street York
Dated this the 13th day of April One Thousand Eight
Hundred and Seventy four

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Tempest Anderson
being a (a) Doctor of Medicine London, & Member of the
Royal College of Surgeons England.
and being in actual practice as a (b) Surgeon
hereby certify, that I on the Thirteenth day of April, 1874
at (c) 39 Stonegate York.
in the county of York separately from any other Medical Practitioner,
personally examined Hannah Kleiser, wife of Andrew Kleiser
of (d) 39 Stonegate and 3 Mount Terrace and that
the said Hannah Kleiser
is a (e) lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Conversation a tissue
of delusions such as that her family are ruined
that the crucified Christ & drove in the nails. That
the Devil has damned her. She Broke out several
times into violent & unprovoked acts of violence.

2. Other facts (if any) indicating Insanity communicated to me by others (g). After being
in the Retreat nearly a year, was discharged not cured, and has
never thoroughly recovered. She is pregnant very violent
and Mr Kleiser finds that they can no longer manage her at home

On the information of her Husband Mr Andrew Kleiser

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an Idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Tempest Anderson MD
Place of Abode, 1st Stonegate York
Dated this Thirteenth day of April One Thousand Eight
Hundred and Seventy four

1229

~~1223 J. Wilkie~~ NOTICE OF ADMISSION,

1229 A Stansfield

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

was admitted into this (*a*) as a Private Patient, on the

Day of 187 , and I hereby

transmit a Copy of the Order and Medical Certificates on which he was received (*b*).

(*a*) House or Hospital.

(*b*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(*c*) _____

(*c*) Superintendent or proprietor of _____

Dated this Day of

One Thousand Eight Hundred and Seventy

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

547

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Amy Margaret Stansfeld whom I last saw at Coniston Vicarage, Bell Busk, Leeds on the twenty eighth day of November 1873 (a) a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Amy Margaret Stansfeld.

(a) Within one month previous to the date of the order.

(b) Lunatic, or an idiot, or a person of unsound mind.

Signed, Name, John Stansfeld

Occupation (if any), Clerk in Holy Orders

Place of Abode, Coniston Vicarage, Bell Busk. Leeds

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Father

Dated this 28th Day of Nov. 1873

~~One Thousand Eight Hundred and Seventy~~

(c) Proprietor or superintendent of.

(d) Describing the house or hospital by situation and name, if any.

To W. Ley - Medical Superintendent & Proprietor

(c) Terrace House Asylum. Osbaldwick. York.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Amy Margaret Stansfeld.
Sex and Age	Female. 25 in Jan. next.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Coniston Vicarage
Whether First Attack	Third
Age (if known) on First Attack	About eighteen
When and where previously under Care and Treatment	St. Mary's establishment, Clapton.
Duration of existing Attack	A month.
Supposed Cause	Convulsions in infancy
Whether subject to Epilepsy	No
Whether Suicidal	Not in this attack, but formerly
Whether Dangerous to others	Doubtful.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	John Stansfeld. Bell Busk. Leeds

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) John Stansfeld

Occupation (if any), Clerk

Place of Abode, Coniston Vicarage. Bell Busk. Leeds

Degree of Relationship (if any) or other circumstances of connexion with the Patient } Father

1224

2414

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 24th day of April 1874, of Amy Margaret Stansfeld a Private Patient in Terrace House, Osbaldwick to The Retreat ~~House,~~ York.

Given under our hands this 9th day of April in the year of Our Lord One Thousand Eight Hundred and Seventy-four

James Wilkes.
Merill Howard
Commissioners in Lunacy.

ORDER.

I,* John Stansfeld the undersigned having Authority to discharge Amy Margaret Stansfeld a Private Patient in Terrace House, Osbaldwick

hereby order and direct that the said Amy Margaret Stansfeld be removed therefrom to The Retreat, ~~House,~~ York

Given under my hand this* 11th day of April in the year of Our Lord One Thousand Eight Hundred and Seventy-four

(Signed) John Stansfeld

Place of Abode Carlton Terrace, Bell Busk, Leeds.

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
268—(133)

548

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any), of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, Joseph William Hillis
being a (a) L.R.C.P.S., & L.R.C.S.I., etc.
and being in actual practice as a (b) Physician & Surgeon
hereby certify, that I, on the 28th Day of November 1873
at (c) Coniston Cold
in the County of York separately from any other Medical Practitioner
personally examined Amy Margaret Stansfield
of (d) Coniston Vicarage, Bell Busk, Leeds and that
the said Amy Margaret Stansfield
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) That her manner is greatly and inordinately excited, and in my presence she has stated that she will have a revenge on her step mother, and that she has been goaded to take her own life, and the lives of others.

2. Other facts (if any) indicating Insanity communicated to me by others (g) I am informed by her Father that she is under the impression that she is going to fly to Ilkley (a place about nine miles from home) & that she has threatened to break all in the house.

Signed, Name, Joseph William Hillis L.R.C.P.S. & R.C.S.I. etc
Place of abode, Gargrave. Yorks.

Dated this 28th Day of November One Thousand Eight Hundred and Seventy three.

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any), of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, William Harrison
being a (a) L.R.C.P. Edr., L.R.C.S., Lond: L.S.A. etc
and being in actual practice as a (b) Physician
hereby certify, that I, on the 29th Day of November
at (c) The Vicarage, Coniston Cold
in the County of York separately from any other Medical Practitioner
personally examined Amy Margaret Stansfield
of (d) Coniston Vicarage, Bell Busk, Leeds and that
the said Amy Margaret Stansfield
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Wildness of expression. Shields face from notice with hand, occasionally, as if to avoid observation, during conversation, & when her step mother is mentioned, speaks about her with vehemence, rage, and threatens revenge. Abrupt and violent commands given to attendants, & states she has an object in her own destruction.

2. Other facts (if any) indicating Insanity communicated to me by others (g) An idea that she is mistress of the house, & has given three servants notice.

Signed, Name, Wm. Harrison
Place of Abode Gargrave. Leeds

Dated this 29th Day of Nov One Thousand Eight Hundred and Seventy three.

Terrace House. Oxhaldwick
York. April 17th 1874.

I hereby Certify that the Within Copies of the Order, Statement, and Medical Certificates, upon which Miss Amy Margaret Stansfeld was received into the above Asylum, on the 29th Nov. 1873, are accurate, exact, & true.

John Ure M.D.

1230 Ann Simpson

1230

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient? Langthft E R York.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Disposition remarkable for punctuality &c. nothing particular regarding intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Educated at Village School & Ladies Seminary Beverley

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Farmers Daughter and afterwards farmers wife industrious and regular all her life

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at the age of 20 – has had 4 children eldest 34 youngest 21

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Nothing particular

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not known than Great Grandmother

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Change of life

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? about 45 or 50

15. What has been the duration of the present attack? 6 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? she was never completely well since first attack although fit to do her business the last 7 or 8 years

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Nothing particular

19. What were the first decided symptoms of mental aberration? Jealousy

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. Jealousy and imputing false motives & intentions

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No

23. What are the habits of the patient as regards personal cleanliness and decorum? Clean

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Mr Rainer Surgeon. Burton Pidsea

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing. There are lucid intervals generally towards night.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

T. J. Simpson
Owstwick
Burstwick
Hull

No 1230 Ann Simpson

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Simpson whom I last saw at Owstwick on the 19th day of May 1874 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Ann Simpson.

Signed, *Name,* Francis Johnson Simpson
Occupation (if any), Farmer
Place of Abode, Owstwick
Degree of Relationship (if any), or other circumstances of connexion with the Patient Husband

Dated this Nineteenth Day of May
One Thousand Eight Hundred and Seventy four

To Dr. JOHN KITCHING.
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Ann Simpson
Sex and Age	Female 54
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Farmers wife
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Owstwick
Whether First Attack	Not well in mind 10 or 11 Years ago
Age (if known) on First Attack	48 or 50
When and where previously under Care and Treatment	never been from Home
Duration of existing Attack	6 months
Supposed Cause	~~Fear~~ Change of Life
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	F. J. Simpson Owstwick, Burstwick. Hull

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) F. J. Simpson
Occupation (if any), Farmer
Place of Abode, Owstwick
Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Joseph R Raines

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgs in England

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

(c) Here insert the street and number of the house (if any), or other like particulars.

hereby certify that I, on the fifteenth day of May

at (c) the Village of Owstwick

in the County of York separately from any other Medical Practitioner,

personally examined Mrs Anne Simpson of Owstwick and that

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) the said Anne Simpson

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Seeing in a dark room, refusing food, that she may die, for several years I have been Mrs Simpsons Medical Attendant & I have observed her unsettled & distressed state of mind her jealous feelings respecting her Husband & many other absurdities indicating an unsound state of mind

A part. interesting Insanity observed & interview by Mary required

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her Name, With whom every one may see on the Road to know Her Name & Insanity all those facts confirmed by her Husband & Sons

Signed, Name, J. R. Raines.

Place of Abode, Burton Pidsea n. Hull

Dated this 15th day of May One Thousand Eight Hundred and Seventy four.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, William Joseph Lunn

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) ~~Physician Surgeon~~ Md - Munich (by exam) — MRCSL — LFA —

Special qualification entitling to practice required —

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) ~~Physician Surgeon~~

(c) Here insert the street and number of the house (if any), or other like particulars.

hereby certify, that I on the fifteenth day of May

at (c) the village of Owstwick

in the county of York separately from any other Medical Practitioner,

personally examined Mrs Anne Simpson

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Owstwick and that

the said Anne Simpson

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) For several years past I have occasionally been consulted respecting Mrs Simpsons unsettled & distressed state of mind, with unfounded feeling of jealousy as regards her Husband, & imputing false motives & intentions of those around her — These symptoms latterly have materially increased with the constant desire for solitude in a darkened room & refusing food & inability to sleep — all treatment & circumstances having been unavailing — the removal from her friends & home is necessary —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

A full confirmation of the above facts by her Husband — Sons —

Signed, Name, W. J. Lunn

Place of Abode, 7 Charlotte Street - Hull

Dated this 15th day of May One Thousand Eight Hundred and Seventy four

1231 A. M. Holmes 1231

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the place of birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Amelia Mary Holmes whom I last saw at Llandudno on the 22nd day of 6 mo (a) a (b) Person of unsound mind as a Patient in your House.

(a) *Within one month previous to the date of the order.*
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Amelia Mary Holmes

Signed, *Name,* Alexander Holmes

Occupation (if any), Grocer

Place of Abode, Stockton on Tees

Degree of Relationship (if any), or other circumstances of connexion with the Patient Son

Dated this 22nd Day of 6 mo 1874

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Amelia Mary Holmes
Sex and Age	Female / 69 Years of Age
Married, Single, or Widowed	widow
Condition of Life, and previous Occupation (if any)	no occupation
Religious persuasion, as far as known	a Friend
Previous Place of Abode	Derby
Whether First Attack	First Attack
Age (if known) on First Attack	69 Years
When and where previously under Care and Treatment	never before
Duration of existing Attack	Eight Months
Supposed Cause	Close Study of Religious Works
Whether subject to Epilepsy	not at all
Whether Suicidal	Yes
Whether Dangerous to others	not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	not
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	Alexander Holmes Stockton on Tees

(c) *Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.*

Signed, *Name,* (c) Alexander Holmes

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Thomas Clarke Roden,
being a (a) Licentiate of the Royal College of Physicians, Edinburgh, & Fellow of the Royal College of Surgeons of England,
and being in actual practice as a (b) Physician
hereby certify that I, on the twentieth day of June 1874,
at (c) Craigydon Parade, Llandudno, (No. 8)
in the County of Carnarvon separately from any other Medical Practitioner,
personally examined Amelia Mary Holmes, Widow,
of (d) 8 Wilmot St. Derby. and that
the said Amelia Mary Holmes,
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Delusions - such as believing she is a lost soul - that she has been given over to the devil - that there is no hope for her. Obstinately refuses to take food, believing that the devil has closed all the passages of her body & that all she has taken of late remains in her chest, though bowel, & kidneys act properly. Is restless, & says she has a desire to destroy herself, & it has been necessary to watch her closely.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her daughter, Miss Holmes, informs me she detected her in the act of searching a friend's box for a razor, which she found in her hand; & that she evidently seeks opportunity to commit suicide.

Signed, Name, T. C. Roden,
Place of Abode, Rothbury House, Llandudno, N. Wales.

Dated this twentieth day of June One Thousand Eight Hundred and Seventy four.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Kenrick Henry Bold Williams
being a (a) member of the Royal College of Surgeons of England, and Licentiate of the Royal College of Physicians of London
and being in actual practice as a (b) Physician & Surgeon
hereby certify, that I on the twentieth day of June 1874
at (c) 8 Craig Ydon Parade Llandudno
in the county of Carnarvon separately from any other Medical Practitioner,
personally examined Amelia Mary Holmes, Widow
of (d) 8. Wilmot St. Derby and that
the said Amelia Mary Holmes
is a (e) Person of unsound mind, and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) She maintains that she cannot be saved & God frowns upon her everywhere that she will suffer eternal thirst & eternal hunger and that she cannot swallow food that it would choke her - she has at times a wild excitable look

(g) Here state the information, and from whom.

Her Daughter

2. Other facts (if any) indicating Insanity communicated to me by others (g) says she has asked for a knife to stab herself, and to be liberated, to allow herself to be thrown into the sea - obstinately refuses food. cannot reason on any religious subject and is not able to sustain for any time any reasonable conversation

Signed, Name, K. H. Bold Williams
Place of Abode, Min. Ydon. Llandudno.

Dated this twentieth day of June One Thousand Eight Hundred and Seventy four —

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Member by Birthright

2. Where was the place of birth of the patient? Nottingham

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Decidedly not

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Lively energetic and intellectual and of very sanguine Temperament.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Her understanding and affections matured in early life — Educated at Rotherth School.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation — Stimulants taken only by the advice of Medical men. With regard to conduct, much respected.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married 19 years of age. Had 7 children eldest 46 years old youngest 30. both living

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Read very much in search of Divine Truth also written largely on the same subjects.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Up to the age of 30 years an affluent circumstances has since experienced great reverses.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Never.

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Never suffered from any particular illness; never of strong or robust Constitution.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Father and Mother perfectly sound in mind; Father's brother Samuel Sandfield became insane late in life through great loss of property.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The first attack was caused by a severe disappointment; the subsequent attack by close reading deep religious works.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

At the age of 69.

15. What has been the duration of the present attack?

Commenced nine months since.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Twenty three years ago at the age of forty-six he suffered from great mental depression for a period of six months.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Quite so.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Subject to great elevation of spirits frequently followed by depression. Many sleepless nights within the last six months.

19. What were the first decided symptoms of mental aberration?

Intense restlessness.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Said possessed of an intense desire for holiness of life followed by great depression in consequence of feeling his life has been unprofitable; now suffering from the certainty that both soul and body are under the power of the Evil One.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Within the last month has frequently threatened to destroy life.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Within the last few days has positively refused to partake of food imagining that it would produce suffocation.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Particularly clean and decorous

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

At the present time, but suffering from Dyspepsia when first placed under Dr Rodens treatment a month since

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never been under care.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Been under various Medical treatment.

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Decidedly greatly increased during the last month.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Alexander Holmes Stockton on Tees.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (*)

a (b) as a Patient in your House.

Subjoined is a statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

_____

Dated this Day of

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Amelia Mary Holmes
Sex and Age	Female sixty nine years of age.
Married, Single, or Widowed	Widow.
Condition of Life, and previous Occupation (if any)	
Religious persuasion, as far as known	A Friend.
Previous Place of Abode	Derby.
Whether First Attack	First attack of real Insanity.
Age (if known) on First Attack	Sixty nine years.
When and where previously under Care and Treatment	Never before.
Duration of existing Attack	Eight months
Supposed Cause	Close study of Religious Works
Whether subject to Epilepsy	Not at all.
Whether Suicidal	Disposed to destroy life within the last four months
Whether Dangerous to others	Not at all
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Alexander Holmes Stockton on Tees.

(r) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

_____

554

MEDICAL CERTIFICAFE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—**Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

1232 A Abbatt

NOTICE OF ADMISSION.

1232

To be sent to the Commissioners in Lunacy within one clear day *from the Patient's Reception.*

I hereby give you Notice, That

was admitted into this Asylum as a Private Patient, on the Day of 18 and I hereby transmit a Copy of the Order and Statement and Medical Certificate on which he was received (*a*).

(*a*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(*b*) _____

(*b*) Clerk of——Asylum.

_____

Dated the Day of

One Thousand Eight Hundred and

To the _____

Lunatics 11.
(16 & 17 Vict. c. 97, Sched. F.)
(25 & 26 Vict. c. 111.)
Private Patient

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (F) No. 2.

I, the undersigned, hereby request you to receive my son Edward Alfred Abbatt whom I last saw at High Ireby Cumberland on the thirtieth day of June 1874. (a) a (b) person of unsound mind as a Patient into your Asylum.

(a) *Within one month previous to the date of the order.*

(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said Edward Alfred Abbatt

Signed, *Name,* Richard Abbatt

Occupation (if any), _____

Place of Abode, The Grange, High Ireby, Cumberland

Degree of Relationship (if any), or other circumstances of connexion with the Patient Father

Dated this 30th ~~Ult~~ Day of June

One Thousand Eight Hundred and seventy four.

To Dr Kitching

Superintendent of the Asylum for the (c). Insane at the Friends' Retreat, York.

(c) *Describing the asylum.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Edward Alfred Abbatt.
Sex and Age	Male—27
Married, Single, or Widowed	Unmarried
Condition of Life, and previous Occupation (if any)	Civil & Mechanical Engineer.
Religious Persuasion, as far as known	Society of Friends.
Previous Place of Abode	Mngoora via Bareilly, India.
Whether First Attack	I believe it the first attack.
Age (if known) on First Attack	+ Twenty seven
When and where previously under Care and Treatment	+ Never under care
Duration of existing Attack	+ Three months, his
Supposed Cause	+ Disappointment in profession
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Richard Abbatt, High Ireby, Cumberland.

(d) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (d) Richard Abbatt

Occupation (if any), _____

Place of Abode, The Grange High Irby, Cumberland

Degree of Relationship (if any) or other circumstances of connexion with the Patient Father of the Patient Ed A Abbatt.

MEDICAL CERTIFICATE.—Sched (F.) No. 3.

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) A. B. of ——. Insert residence and profession, or occupation (if any).

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Alexander augs Kalley Knight being a (a) Doctor of Medicine & Licentiate of the Royal college of Surgeons - Edin. - and being in actual practice as a (b) Physician & Surgeon hereby certify, that I, on the 24th Day of June 1874 at (c) The Grange - High Ireby - in the County of Cumberland separately from any other Medical Practitioner personally examined (d) Edward Alfred Abbatt - lately an engineer — + of the Grange High Ireby. and that the said Edward Alfred Abbatt is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

(1) morose & sullen disposition with general derangement of health & habits
(2) Possession of delusions regarding his own identity

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His Father has informed me of his alienation from family ties & obligations letters written by and has been true ~~communicated~~ to Dr. Alex. Abbatt - which exhibit incoherence & thought - & the possession of delusions

Signed, *Name,* Alexander augs Kalley Knight

Place of abode, Keswick Cumberland

Dated this twenty sixth Day of June One Thousand Eight Hundred and seventy four.

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) A. B. of ——. Insert residence and profession, or occupation (if any).

(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Robert Tiffen being a (a) Doctor of Medicine, member of the Royal College of Surgeons of England, Licentiate of the Society of Apothecaries London and being in actual practice as a (b) Physician & Surgeon hereby certify, that I, on the twenty sixth Day of June, 1874 at (c) the Grange, High Ireby, in the County of Cumberland separately from any other Medical Practitioner, personally examined (d) Edward Alfred Abbatt, lately engineer + of the Grange High Ireby and that the said Edward Alfred Abbatt is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) believes himself to be the Prince of Wales - formed him locked in his room to which I could only get access by informing him that the Lord Lieutenant wishing to see him & when he comes out he is locked.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His father ~~Richard Abbatt~~ brother & sisters state that he has been very restless & sleepless for the last few days, very morose & somewhat threatening to the servants; that he has been violent and unmanageable as a rational being for years past.

Signed, *Name,* Robert Tiffen, M.D. &c.

Place of Abode Wigton, Cumberland

Dated this twenty sixth Day of June One Thousand Eight Hundred and seventy four.

1233 C. 4 Heald 1233

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

•

was admitted into this (a) as a Private Patient, on the

• Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(a) House or Hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Charles Slatter Heald

~~whom I last saw at~~

~~on the~~ ~~day of~~ (a)

as a (b) insane person as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said Charles Slatter Heald

Signed, *Name,* Samuel Heald

Occupation (if any), Woolstapler

Place of Abode Hunslet Lane. Leeds

Degree of Relationship (if any), or other circumstances of connection with the Patient Father

Dated this 14th day of December

One Thousand Eight Hundred ~~and Sixty~~ forty nine

To Mrs Smith

(c) Proprietor of Retreat near Leeds.

(c) *Proprietor or superintendent of.*

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Charles Slatter Heald
Sex and Age	male. aged 21
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	Woolmerchant
Religious Persuasion, as far as known	church
Previous Place of Abode	Jayne Lane. Leeds
Whether First Attack	yes but continued
Age (if known) on First Attack	19
When and where previously under Care and Treatment	none
Duration of existing Attack	2 years. but of weak mind from birth
Supposed Cause	
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
~~Name and Address of Relative to whom~~ Notice of Death ~~to~~ be sent	

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Samuel Heald

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 14th day of July 1874, of Charles Gratton Heald a Private Patient in Lime Tree House, Acomb to the Friends Retreat, York House,

Given under our hands this 29th day of June in the year of Our Lord One Thousand Eight Hundred and Seventy four

Robert Nairne
James Wilkes
Commissioners in Lunacy.

ORDER.

I,* Jane Heald the undersigned having Authority to discharge Charles Gratton Heald a Private Patient in Lime Tree House, Acomb

hereby order and direct that the said Charles Gratton Heald be removed therefrom to the Friends Retreat, York House.

Given under my hand this* day of 30th of June in the year of Our Lord One Thousand Eight Hundred and Seventy four

(Signed) Jane Heald

Place of Abode 18 Springfield Mount Leeds

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*;
4. If there be no Father then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*; Or by the person *who made the last* payment on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
268—(133)

559

1233 C. 4 Heald 1233

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That

•

was admitted into this (a) as a Private Patient, on the

• Day of 186 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(a) House or Hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) _____

(c) Superintendent or proprietor of ———.

Dated this Day of

One Thousand Eight Hundred and Sixty

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Charles Slatter Heald

~~whom I last saw at~~

~~on the~~ ~~day of~~ (a)

as a (b) insane person as a Patient into your House.

(a) *Within one month previous to the date of the order.*

(b) *Lunatic, or an idiot, or a person of unsound mind.*

Subjoined is a Statement respecting the said Charles Slatter Heald

Signed, *Name,* Samuel Heald

Occupation (if any), Woolstapler

Place of Abode Hunslet Lane. Leeds

Degree of Relationship (if any), or other circumstances of connection with the Patient Father

Dated this 14th day of December

One Thousand Eight Hundred ~~and Sixty~~ forty nine

To Mrs Smith

(c) Proprietor of Retreat near Leeds.

(c) *Proprietor or superintendent of.*

(d) *Describing the house or hospital by situation and name, if any.*

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Charles Slatter Heald
Sex and Age	male. aged 21
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	Woolmerchant
Religious Persuasion, as far as known	church
Previous Place of Abode	Jayne Lane. Leeds
Whether First Attack	yes but continued
Age (if known) on First Attack	19
When and where previously under Care and Treatment	none
Duration of existing Attack	2 years. but of weak mind from birth
Supposed Cause	
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	none
~~Name and Address of Relative to whom~~ Notice of Death ~~to~~ be sent	

(e) *Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.*

Signed, *Name,* (e) Samuel Heald

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 14th day of July 1874, of Charles Gratton Heald a Private Patient in Lime Tree House, Acomb to the Friends Retreat, York House,

Given under our hands this 29th day of June in the year of Our Lord One Thousand Eight Hundred and Seventy four

Robert Nairne
James Wilkes
Commissioners in Lunacy.

ORDER.

I,* Jane Heald the undersigned having Authority to discharge Charles Gratton Heald a Private Patient in Lime Tree House, Acomb

hereby order and direct that the said Charles Gratton Heald be removed therefrom to the Friends Retreat, York House.

Given under my hand this* day of 30th of June in the year of Our Lord One Thousand Eight Hundred and Seventy four

(Signed) Jane Heald

Place of Abode 18 Springfield Mount Leeds

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*;
4. If there be no Father then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*; Or by the person *who made the last* payment on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
268—(133)

559

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8 10. 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, ~~the undersigned,~~ Samuel Staniland

being a (a) Surgeon

~~and being in actual practice as a (b)~~

hereby certify, that I, ~~on the~~ have this day ~~of~~

~~at (c)~~

~~in the County of~~ visited separately from any other Medical Practitioner,

personally examined Charles Slatter Neald the person ~~of (d)~~ named in the accompanying Statement dated and that the said Charles Slatter Neald is a (e) person of unsound mind and a proper Person to be ~~taken charge of and detained~~ confined ~~under Care and Treatment,~~ and that I have formed this opinion upon the following ~~grounds;~~ viz:—

1. Facts ~~indicating Insanity observed by myself~~ (f) that he wanders from his home unprovided either with money clothes or will leave his bed in the middle of the night without any apparent cause

2. ~~Other facts (if any) indicating Insanity communicated to me by others~~ (g)

Signed, *Name,* Samuel Staniland

Place of Abode, 21 Park Square - Leeds

Dated this fifth day of December One Thousand Eight Hundred and ~~Sixty~~ forty nine

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, Samuel Hey

being a (a) Surgeon

~~and being in actual practice as~~ a (b)

hereby certify, that I, ~~on the~~ have this day ~~of~~

~~at (c)~~

~~in the County of~~ visited separately from any other Medical Practitioner,

personally examined Charles Slatter Neald the person ~~of (d)~~ named in the accompanying Statement dated and that the said Charles Slatter Neald is a (e) person of unsound mind and a proper Person to be ~~taken charge of and detained~~ confined ~~under Care and Treatment,~~ and that I have formed this opinion upon the following ~~grounds;~~ viz:—

1. Facts ~~indicating Insanity observed by myself~~ (f) sudden fits of laughter & crying: and excessive fear in the night & from his wandering from home, without any motive & from his general behaviour, being peculiar & sometimes intractable

2. Other facts (if any) indicating Insanity ~~communicated to me by others~~ (g)

Signed, *Name,* Samuel Hey

Place of Abode, Albion Street Leeds.

Dated this 5th day of December One Thousand Eight Hundred and ~~Sixty~~ forty nine

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 23rd day of May 1879, of Charles Gratton Heald, a Private Patient in The Friends' Retreat ~~House~~, near York,

to the care of ~~House~~, Edward Francis Weston, at Chetwynd House, Stafford.

Given under our hands this 8th day of May

in the year of Our Lord One Thousand Eight Hundred and Seventy-nine.

Charles Nathan Pellatt

James Walker.

Commissioners in Lunacy.

ORDER.

I,* Jane Heald the undersigned, having Authority to discharge Charles Gratton Heald a Private Patient in The Friends' Retreat, near York,

hereby order and direct that the said Charles Gratton Heald be removed therefrom to the care of Edu~~House~~ Francis Weston, at Chetwynd House, Stafford.

Given under my hand this* 13. day of May

in the year of Our Lord One Thousand Eight Hundred and Seventy-nine.

(Signed) Jane Heald

Place of Abode Caskelly House

Osmaston Road Derby

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband* or *Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(McC. & Co. 2,000 5 | 76)
5191

561

1234 J Wright

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? A member

2. Where was the place of birth of the patient? Bolton

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing till 11 when he had Scarlet Fever & then showed some signs of present malady — had a change taken from York for a few days

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Quiet & good natured — affectionate, rather silent — nothing particular — not strong for study —

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Affections were — governess & sister & then Ackworth —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Tailor & Draper (woollen) — ~~nothing to remark~~ very industrious Temperate (Teetotaller) steady & well conducted -

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Had one convulsion in infancy — connected with teeth

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Scarlet Fever

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Two Members of the family on the Father side have been insane viz an Uncle and Aunt

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? No immediate Cause Known. The hereditary predisposition is the only Remote cause

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

562

14. At what age was the patient first attacked with symptoms of insanity?

At the age of Twenty one

15. What has been the duration of the present attack?

Seven days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

This is the first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Considerable depression of spirits for some time previous

19. What were the first decided symptoms of mental aberration?

Restlessness ~~and~~ irritability and sleeplessness

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Disorder manifested by extravagant affection to relations and friends by suspicion and dislike of strangers no delusions can be ascertained as patient refuses all Conversation

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

No irregularity of functions but slight general debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Slight restraint and 30grs of Chloral in the Evening

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Disorder increasing slight lucid intervals but and of short duration

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Isaac Wright, Haverhill House
Halliwell Road
Bolton

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive ~~Edwin Bennis~~ Frederic Wright whom I last saw at Bolton on the 17 day of July 1874 (a) a (b) person of unsound mind as a Patient in your House. Frederic Wright

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said ~~Edwin Bennis~~ Frederic Wright

Signed, *Name,* Edwin Bennis
Occupation (if any), Cotton Spinner
Place of Abode, Bolton
Degree of Relationship (if any), or other circumstances of connexion with the Patient None but Friend of family

Dated this seventeenth Day of July
One Thousand Eight Hundred and Seventy four

To ~~Dr. JOHN KITCHING.~~ Dr Baker
Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Frederic Wright
Sex and Age	Male 21
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Tailor — Comfortable circumstances
Religious persuasion, as far as known	Friend
Previous Place of Abode	Bolton
Whether First Attack	Second
Age (if known) on First Attack	Trifling attack at 11 years old
When and where previously under Care and Treatment	at Home
Duration of existing Attack	a month to 6 weeks
Supposed Cause	Scarlet Fever
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	About 2 or 3 each day for 5 or 10 min
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Isaac Wright — Halliwell Road Bolton

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Edward Bennis
Occupation (if any), Cotton Spinner
Place of Abode, Blackburn Road
Degree of Relationship (if any), or other circumstance of connexion with the Patient None but Friend of family

563

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned John Thomas Redmayne being a (a) Licentiate of the Royal College of Physicians Edinburgh Member of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify that I, on the 16th day of July at (c) Haverhill House Halliwell Road Bolton in the County of Lancashire separately from any other Medical Practitioner, personally examined Frederick Wright of (d) Haverhill House Bolton Tailor and Draper and that the said Frederick Wright is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) violent restlessness and the refusal to join in any conversation

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* John T. Redmayne

Place of Abode, 288 Blackburn Road Bolton

Dated this 16th day of July One Thousand Eight Hundred and Seventy four.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.* :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

I, the undersigned, John Levy being a (a) Doctor of Medicine, Licentiate of the Royal College of Surgeons Edinburgh and a Licentiate of the Apothecaries Hall London and being in actual practice as a (b) Surgeon hereby certify, that I on the 16th day of July 1874 at (c) Haverhill House, Halliwell Road, Bolton in the county of Lancaster separately from any other Medical Practitioner, personally examined Frederick Wright of (d) Haverhill House, Bolton, Tailor & Draper and that the said Frederick Wright is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He is somewhat morose and taciturn, he refused to speak to me on Tuesday last. He is restless & sleepless unless he gets a dose of chloral, is violent when he is not allowed to do as he likes. He is extremely affectionate towards everyone & especially so towards his mamma & sister.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Nothing more than the above

Signed, *Name,* John Levy

Place of Abode, Bolton

Dated this sixteenth day of July One Thousand Eight Hundred and Seventy four

1235 W. F. Brown

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Born in Membership with the Society of Friends

2. Where was the place of birth of the patient? Stratton near Cirencester

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? He had a Convulsive Fit at Six months old

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? No thing peculiar in his intellectual development He is rather apt at reckoning

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? He has had affectionate care and instruction at home Went to a day school and was for 15 months at the Friends School at Croydon

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. No regular occupation Industrious sometimes very temperate as to drinking

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived. no

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? not in particular

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? none

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? His Fits have continued with occasional intervals of 12 months but latterly they have been much more frequent

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? not any other

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? There is no hereditary predisposition or near relative so afflicted

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? No cause can be assigned but the recurrence of the Epileptic disease

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?
This is difficult to define having come on very gradually

15. What has been the duration of the present attack?
about 6 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Great excitability previous to and soon after the Epileptic Fits

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Not complete

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
His spirits have been variable and his behaviour peculiar in various minor particulars

19. What were the first decided symptoms of mental aberration? Obstinacy about trifles and violent behaviour with little or no cause

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
His delusions are not permanent This morning he thought he was all on one side and used strange contortions to endeavour to set himself straight

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? He lately threw his Mother all down a flight of stairs and on another occasion slily removed an chair causing her a severe and dangerous Fall he throws hard objects at his Mother and sisters without provocation Severely scalded his Mother by throwing a kettle of hot water at her - Shattered a valuable Timepiece &c

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Cut his own hair nearly off lately

23. What are the habits of the patient as regards personal cleanliness and decorum?
He is clean and particular in his personal habits

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
In good bodily health the Fits excepted

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
no

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?
Only with regard to the Epilepsy

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
It is feared that it is increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

The Cashier of Kingston Proprietary Meetery.
2 Richmond Villas
London Road
Kingston on Thames

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive my son Walter F. Freelove Brown

whom I last saw at this hour and place

on the 25th day of 7th Month 1874 (a)

a (b) + person of unsound mind × as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Walter F. Brown

Signed, *Name,* Augusta Mary Brown

Occupation (if any), Berlin Wool Dealer

Place of Abode, High St. Kingston on Thames

Degree of Relationship (if any), or other circumstances of connexion with the Patient Mother (Widow)

Dated this 25th Day of 7th Month

One Thousand Eight Hundred and Seventy 4

To Dr. ~~JOHN KITCHING.~~ Baker.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Walter Freelove Brown
Sex and Age	Male 15 years
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	scholar
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Cirencester (12 years ago)
Whether First Attack	Not
Age (if known) on First Attack	has come on gradually
When and where previously under Care and Treatment	not any
Duration of existing Attack	worse the last 6 months
Supposed Cause	Epileptic fits
Whether subject to Epilepsy	yes
Whether Suicidal	no
Whether Dangerous to others	To some extent at times
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	not
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	his Mother Address given above

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Augusta Mary Brown

Occupation (if any), Sl (as above)

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

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MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Richard Donald Harris Surgeon of England

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons of England

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the 24th day of July 1874

(c) Here insert the street and number of the house (if any), or other like particulars

at (c) High St. Kingston on Thames

in the County of Surrey separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Freelove Walter Brown of and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Walter Brown

is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) He is weak minded & Epileptic. He is subject to delusions, imagines that his friends are his enemies and is frequently very violent and unreasonable in his conduct. Which renders him dangerous to himself and others.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His Mother informs me that He only yesterday clambered through a window on to the Verandah and threatened to throw himself off. He also cut all the hair off his head with a pair of nail scissors, and is constantly doing strange and dangerous things.

Signed, Name, Richard Donald Harris M.R.C.S.E.

Place of Abode, Kingston on Thames

Dated this 24th day of July One Thousand Eight Hundred and Seventy four.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Thomas Corbett

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of The Royal College of Surgeons of England

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the 23rd day of July 1874

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) High Street, Kingston on Thames

in the county of Surrey separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Walter Brown

of (d) High St. Kingston on Thames and that

the said Walter Brown

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) very excitable & violent Conversation & gesture, repeatedly opening & shutting door violently, pulling his Brushes about in a rude manner. when asked, why he was so from Home - He suddenly & in an excited state ran up Stairs, shut himself up in a room & barricaded the door with a heavy box - then began crying in a loud manner.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

His Brother tells me that he got on the Roof of the House & that he could into the River Thames with his clothes on - & that he cut off his hair very short - at the Back & sides of his head with Scissors - & that he has been very violent & abusive to his Mother.

Signed, Name, Thos. Corbett M.R.C.S.E.

Place of Abode, Grove Road, Kingston on Thames

Dated this 26 day of July One Thousand Eight Hundred and Seventy 4

1236 J. Metcalf 1236

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the place of birth of the patient? Willitoft

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Disposition amiable upright and well disposed towards Every One, a lover of fair dealing no Eccentricity, a fair average amount of intellect -

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? [redacted] had a good Education for his Station in Life - at Schools; Intellect not inordinately Cultivated in very Early Life

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
Farming throughout Life industrious temperate & regular in his habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Has never been Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
Nothing Particular

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
No -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
Has had one or two slight Paralytic attacks

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
No hereditary predisposition, and no Relatives been affected

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
over Activity of the Brain being ever ready to assist others in the management of their affairs, in addition to his own -

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Seventy six -

15. What has been the duration of the present attack? His memory has been failing for years but more rapidly within the last two years - his mental delusions and inability to lie in bed through the night, for 5 or 6 months -

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No unusual Elevation or depression

19. What were the first decided symptoms of mental aberration? Inability to lie in bed - visions often of a horrible and distressing nature

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

No one subject in particular, his delusions are of the most varied kind, sometimes that things about him are on fire, sometimes that the house is filled with people seeking to murder him

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No, he is particularly gentle in his conduct, but irritable when opposed and impatient of Control.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Sometimes he will for the moment refuse food when any thing has vexed him but soon comes to and generally eats well. Has never attempted to injure himself, but has on one or two occasions tried to bribe others to shoot or decapitate him -

23. What are the habits of the patient as regards personal cleanliness and decorum?

Steadily, Clean and decorous but requires assistance with his Clothing &c. and even in placing the vessel to receive the urine

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

In good health -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No, none whatever

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

Careful diet, attention to bowels, sedatives as Bromide of Potass, Chloral, Conium &c with varied results sometimes temporary, sometimes none -

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The Complaint has been continuous with severe exacerbations but he has been better the last 5 days but has a relapse yesterday

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Henry C. McCall

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive John Medcalf

whom I last saw at Bridge Gate Howden

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the Twenty first day of August - 1874 (a)

a (b) Person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said John Medcalf

Signed, *Name,* Henry Calvert Medcalf

Occupation (if any), Surgeon &c

Place of Abode, Howden

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Brother

Dated this Twenty first Day of Aug.t

One Thousand Eight Hundred and Seventy four

To Dr. ~~JOHN KITCHING~~. Bode

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	John Medcalf
Sex and Age	male, seventy six
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Easy Circumstancy - Farming
Religious persuasion, as far as known	In Early Life Wesleyan, of late years Churchman
Previous Place of Abode	North Cave
Whether First Attack	yes.
Age (if known) on First Attack	76
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	5 or 6 months
Supposed Cause	over activity of Brain and anxiety about business
Whether subject to Epilepsy	No.
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Henry Calvert Medcalf Howden

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry C Medcalf

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Baker of Howden

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Physician

and being in actual practice as a (b) Physician

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify that I, on the 18 day of August 1874

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Howden (Bridgegate)

in the County of York separately from any other Medical Practitioner,

personally examined Mr John Medcalf

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) North Cave in the County of York Farmer and that

(e) Lunatic, or an Idiot, or a person of unsound mind.

the said John Medcalf

is a (e) undoubtedly insane and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

I have visited Mr John Medcalf daily for the last 14 weeks and I can positively pronounce him deranged. I deem him in a state of temporal but continued Somnolism I base this opinion upon his morbid condition from the following indications, viz being continually yelled to leave his bed & wanders about his room like a sleep walker looking at vacancy and where the people with imaginary beings speaks to & can hear all simply touch

(g) Here state the information, and from whom.

2. ~~Other facts (if any) indicating Insanity communicated to me by others (g).~~

Signed, Name, William Baker M.D. & D.P.

Place of Abode, Howden Yorks

Dated this eighteenth day of August One Thousand Eight hundred and ~~Seventy~~ Seventy four

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Henry Morres

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Licentiate of the College of Physicians Edinburgh and a Member of the College of Surgeons of England

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the twenty first day of August 1874

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Howden (Bridgegate)

in the county of York separately from any other Medical Practitioner,

personally examined Mr John Medcalf

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) North Cave in the county of York Farmer and that

(e) Lunatic, or an Idiot, or a person of unsound mind.

the said John Medcalf

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Almost total absence of connection on the subject of his conversation - Incoherency abound events which he fancies has taken place in the night.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

The history of his case as described to me by his friends & relatives undoubtedly proves him to be insane. My informants were Mr H. Medcalf & Miss Medcalf brother & sister of the above John Medcalf.

informants named

Signed, Name, Henry Morres

Place of Abode, Howden

Dated this 21st day of August One Thousand Eight Hundred and Seventy four

Office of Commissioners in Lunacy,

19, *Whitehall Place, S.W.*,

August 31st 1874

Sir,

John Medcalf

I have to acknowledge the receipt of your letter of the 29th inst. The certificates are now sufficient and steps will be taken with regard to Mr Baker. A fresh "statement" will be required as the date of the patient's admission is altered.

I am, Sir
Your obedient servant
C Heneval
Secretary

R. Baker Esq.

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, Isaac Mennell Williams being a (a) ~~Surgeon~~ Member of the Royal College of Surgeons, England and being in actual practice as a (b) Surgeon hereby certify, that I, on the twenty ninth day of August 1874 at (c) 13, Bellevue St, York in the county of York separately from any other Medical Practitioner, personally examined John Medcalf — Gentleman Farmer of (d) North Cave, Yorkshire and that the said John Medcalf is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz:—

1. Facts indicating Insanity observed by myself (f) His general appearance indicates a condition of senile dementia — He states at one time he is at Hull and then at North Cave Sometimes he is occupied in his farming pursuits, driving sheep into a corner &c

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, I. Mennell Williams

Place of Abode, 48 Micklegate York

Dated this twenty ninth day of August One Thousand Eight Hundred and Seventy four

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MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra. :—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, William Hood being a (a) M.R.C.S. Eng and L.S.A. Lond. and being in actual practice as a (b) Surgeon hereby certify, that I on the thirty ninth day of August 1874 at (c) 13. Bellevue Street, Hartington Road, York in the County of York. separately from any other Medical Practitioner, personally examined John Medcalf, Gentleman Farmer of (d) North Cave, Yorkshire and that the said John Medcalf is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f) He is confused in his answers to questions, saying at one time that he is in Hull, and at another that he is in Hospitton. He says that he is going to be sold up for debt - but that he has six hundred thousand pounds in the Funds.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Hood

Place of Abode, 28 Castlegate, York.

Dated this 29th day of August One Thousand Eight Hundred and Seventy four.

NOTICE OF ADMISSION

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

THE RETREAT, NEAR YORK.

I hereby give you Notice, That

(a) House *or* Hospital.

was admitted into this (a) as a Private Patient, on the Day of 187 , and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b).

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, _____

(c) Superintendent *or* proprietor of——.

(c) _____

_____

Dated this Day of

One Thousand Eight Hundred and Seventy

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, Sched. C n. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive John Medalf

whom I last saw at Bridge Gate Howden

on the Twenty first day of August 1874 (a)

a (b) person of unsound Mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said John Medalf

Signed, Name, Henry Calvert Medalf

Occupation (if any), Surgeon &c

Place of Abode, Howden

Degree of Relationship (if any), or other circumstances of connexion with the Patient — Brother

Dated this twenty ninth Day of August

One Thousand Eight Hundred and Seventy four.

To Dr Baker

The Retreat, near York.

STATEMENT.

If any particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Medalf
Sex and Age	Male, seventy six
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Easy Circumstances, Farming
Religious Persuasion, as far as known	In early life Wesleyan, of late years Churchman
Previous Place of Abode	North Cave
Whether First Attack	Yes
Age (if known) on First Attack	76
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	5 or 6 months
Supposed Cause	Over activity of Brain & anxiousness about Business
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Henry Calvert Medalf Howden

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (c) Henry C Medalf

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstances of connexion with the Patient

1237 P de Waterp 1237

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

She is not a member of the Church of England - but was brought up a Roman Catholic

2. Where was the place of birth of the patient?

Vienna

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

I have heard that as a child she used sometimes to walk in her sleep -

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Passionate, wilful, & impatient - joyous & full of fun and mischief - with an intellect far above the average - I cannot give a certain answer to the last question, but I do not believe there was any precocity of intellect

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

I cannot tell - She received the ordinary course of home instruction -

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

She was always fond of a busy, active life - Her principles were high and good and she ever acted up to them -

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She married at the age of Sixteen - & has had three children - The eldest had he survived, would be thirty-six - The youngest is 28 (twenty-eight)

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Ever since the age of 29 or 28 she has been engaged in teaching Music - which from her character she did with great earnestness - She also took a deep and heartfelt interest in politics - & passing events

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

At the age of 25 she was thrown upon her own resources, having until then lived in luxury and ease - She underwent great trials and hardships - & had a life of anxiety and mental exertion up to the time of her present illness -

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

not immediately before the attack but had not been in very good health for some time

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

It is supposed that the mental disorder has been brought on by a long series of sorrow, anxiety, working upon a naturally excitable and sensitive organization - The immediate cause of the first attack was anxiety about her daughter who was very ill - and of the second, anxiety about family circumstances, and an over worked brain -

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

Forty Three -

15. What has been the duration of the present attack?

Three years and eight months & a half -

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Once before, lasting ~~three~~ two or three days only - She attempted to drown herself. Between these two attacks, about a year after the first, for some weeks she could sleep but very little, and suffered from great depression of spirits - but it passed away without further symptoms.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Yes - except for the circumstances just mentioned — There was an interval of six years between the attacks

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

There was great depression of spirits, & she took a morbid view of things in general - She did not sleep for several weeks, and often complained of head ache -

19. What were the first decided symptoms of mental aberration?

delusions about herself, and attempts to commit suicide —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested; is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

The doctor under whose care she has been could best answer these questions.

fond of political matters & subsequent the peculiar impression of hopelessness & regret for the former of Religion

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

She attempted to strangle herself, swallow large pins etc, and hurt her head with the poker - but since she has been under medical care all suicidal symptoms have disappeared —

23. What are the habits of the patient as regards personal cleanliness and decorum?

Most particular as to both respects - I believe she still continues to be so -

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes -

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

She was I believe under the Care of Dr Monro at the asylum at Clapton & was for a very short time under the Care of Dr Allen at Hoxton but was removed by Mr Monro

26. What medical, or other means, have been used for the recovery of the patient, and with what effect?

I presume Moral treatment

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

I think this to be answered perhaps for a medical man

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

I, Madame de Natorp's daughter — please send them addressed to

Mrs de Natorp
C. Hill Esq
Henbury Hill
Westbury-on-Trym
Bristol

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (a)

a (b) as a Patient in your House.

Subjoined is a statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstances of connexion with the Patient _____

_____

Dated this Day of

One Thousand Eight Hundred and Seventy

To Dr. JOHN KITCHING.

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any).....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack .....

When and where previously under Care and Treatment....

Duration of existing Attack .....

Supposed Cause .....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others .....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent .....

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

_____

MEDICAL CERTIFICAFE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the county of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That Pauline de Galvez

(a) House or hospital.

was admitted into this (a) house as a Private Patient, on the thirteenth Day of December 1870, and I hereby transmit a Copy of the Order and Medical Certificates on which She was received (b)

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed J. O. Adams

(c) Medical Superintendent

Brooke House.

Clapton.

(c) Superintendent or proprietor of——

Dated this twenty fourth Day of August

One Thousand Eight Hundred and Seventy four.

To the Commissioners in Lunacy.

(16 & 17 Vic. c. 96, sched. C., s. 24)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
W. A. CHARDIN,
Printer, Clapton, E.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1. Sects. 4. 8.

I, the undersigned, hereby request you to receive Pauline de Natorp whom I last saw at 66 ~~Grosvenor~~ Gloucester Street, Pimlico on the Thirteenth day of December (a) a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.

(b) Lunatic or an idiot, or a person of unsound mind

Subjoined is a Statement respecting the said Pauline de Natorp

Signed, Name, Frances Grant
Occupation (if any), Gentlewoman
Place of Abode Washington
Degree of Relationship (if any), or other circumstances of connexion with the Patient. Friend

Dated this Thirteenth day of December

One Thousand Eight Hundred and Seventy

To Dr. MONRO,

(c) Proprietor of (d) Brooke House, Clapton. Wm Hackney N.E.

(c) Proprietor or Superintendent of——

(d) Describing the house or hospital by situation and name (if any).

STATEMENT

If any Particulars in this Statement be not known, the fact to be so stated.

Name of Patient, with Christian name at length.	Pauline de Natorp
Sex and Age	Female, Forty nine
Married, Single, or Widowed	Widow
Condition of Life, and previous occupation (if any)	Engaged in tuition
Religious Persuasion, as far as known ...	Church of England
Previous Place of Abode	Brighton
Whether First Attack	No
Age (if known) on first Attack	About Forty three
When and where previously under Care and Treatment	Hanwell
Duration of existing Attack	Sixteen days
Supposed Cause	Trouble and anxiety
Whether subject to Epilepsy	Not
Whether Suicidal	Yes
Whether Dangerous to others	No
Whether found Lunatic by Inquisition and Date of Commission or Order for Inquisition	—
Special Circumstances (if any) preventing the Patient being examined, before Admission separately by Two Medical Practitioners.	—
Name and Address of Relative to whom Notice of Death to be sent.	Alice de Natorp 30 Buckingham Street Brighton — Sussex

(e) Where the person signing the statement is not the person who signs the order the following particulars concerning the persons signing the statement are to be added.

Signed, Name, (e) Frances Grant
Occupation, (if any), Gentlewoman
Place of Abode, Washington, Sussex
Degree of Relationship (if any) or other circumstance of connexion with the Patient. Friend for many years

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon or apothecary, *ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any) or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the fact.

(g) Here state the information and from whom.

I, the undersigned Wilson Fox M.D.
being a (a) Fellow of the College of Physicians London
and being in actual practice as a (b) Physician
hereby certify, that I, on the twelfth day of December 1870
at (c) 66 Gloucester Street, Pimlico
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Pauline de Natorp
of (d) 66 Gloucester Street Pimlico and that
the said Pauline de Natorp
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion on the following grounds, viz.—

1. Facts indicating Insanity observed by myself (f)
Aspect of great moral depression & melancholy.
States that nine years previously had involved her in a continuous downward course - that her children are implicated by her - that her life is injurious to them - that she sees at times horrible visions - that she has strong suicidal impulses - that she is at times entirely incapable of controlling them -

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Facts stated to me by her friend Miss Grant - That on ~~one~~ previous occasions she has attempted suicide & once has threatened this. That a few occasions within the past three weeks she has attempted suicide - that she has mistaken the said Miss Grant for & believes her to be the Devil.

Signed Name Wilson Fox M.D. F.R.C.P.
Place of Abode 67 Grosvenor Street, Grosvenor Square London
Dated this twelfth day of December One Thousand Eight Hundred and Seventy

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MEDICAL CERTIFICATE.—Sched. (A) No 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon or apothecary, *ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any) or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

I, the undersigned, John Scott M.D.
being a (a) Member of the Royal College of Physicians, London
and being in actual practice as a (b) Physician
hereby certify, that I, on the twelfth day of December 1870
at (c) 66 Gloucester Street, Pimlico
in the County of Middlesex separately from any other Medical Practitioner,
personally examined Pauline de Natorp
of (d) 66 Gloucester Street Pimlico asylum and that
the said Pauline de Natorp
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.—

1. Facts indicating Insanity observed by myself (f) She states that 20 years ago she was guilty of many enormous sins for which she can never be forgiven - that as a punishment for her wickedness she has been afflicted with a disease of the skin of a syphilitic nature - that she is occasionally surrounded by horrible "visions" sent to ~~torment~~ haunt her & that under these influences & also from a desire to benefit her children she is impelled to commit suicide -

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I am informed by her friend Miss Grant that on three previous occasions she has attempted to destroy herself -

Signed Name Jno Scott M.D.
Place of Abode 8 Chandos St. Cavendish Sq
Dated this 12th day of December One Thousand Eight Hundred and Seventy

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TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 4th day of September 1874, of Pauline de Natorp a Private Patient in Brooke House, Clapton to the Friends' ~~House~~ Retreat, York.

Given under our hands this 20th day of August in the year of Our Lord One Thousand Eight Hundred and Seventy-four

Robert Navine
John D Yeaton
Commissioners in Lunacy.

ORDER.

I,* Alice de Natorp the undersigned having Authority to discharge Pauline de Natorp a Private Patient in Brooke House, Clapton

hereby order and direct that the said Pauline de Natorp be removed therefrom to the Friends' Retreat, York

Given under my hand this* 24th day of August in the year of Our Lord One Thousand Eight Hundred and Seventy-four

(Signed) Alice de Natorp

Place of Abode Henbury Hill
Westbury-on-Trym
Bristol

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order for* the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
208—(131)

574

1238 I Leather

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Viet c. 96, & 25 26 Viet. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Isaac Leather

whom I last saw at Mullwood Eccleston Near St Helens

on the twenty ninth day of September 1874(a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Isaac Leather

Signed, *Name,* Jeremiah Knowles Leather

Occupation (if any), Manufacturing Chemist

Place of Abode, Mullwood Eccleston St Helens

Degree of Relationship (if any), or other circumstance of connection with the Patient Brother

Dated this twenty ninth Day of September

One Thousand Eight Hundred and Seventy four

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Isaac Leather
Sex and Age	Male Thirty seven years of age
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	Merchant
Religious persuasion, as far as known	Wesleyan Methodist
Previous Place of Abode	Watchet
Whether First Attack	No
Age (if known) on First Attack	Thirty seven Years
When and where previously under Care and Treatment	at Nazareth House Hampstead under the Misses Fry and Dr Uwins & Braman of London
Duration of existing Attack	
Supposed Cause	Epilepsy
Whether subject to Epilepsy	Yes
Whether Suicidal	No
Whether Dangerous to others	Possibly so
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Mrs Isaac Leather Watchet

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Jeremiah Knowles Leather

Occupation (if any), Manufacturing Chemist

Place of Abode, Eccleston St Helens

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

576

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Arthur A. Jamison

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine

and being in actual practice as a (b) General practitioner

hereby certify that I, on the twenty eighth day of September

(b) Physician, surgeon or apothecary, as the case may be

at (c) Millbrook Eccleston

(c) *Here insert the street and number of the house, (if any), or other like particulars*

in the County of Lancaster separately from any other Medical Practitioner,

personally [examined]

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) Waterloo Lancashire

and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Isaac Leather

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Incoherency of speech
Delusions
Loss of memory

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Wife Mary Leather

Being irritable & violent to a great degree
Has had Epileptic fits
Constantly talking of all sorts of subjects

Signed, *Name,* Arthur Jamison M.D

Place of Abode, St Helens Lancashire

Dated this twenty ninth day of September One Thousand Eight Hundred and Seventy four

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a)

and being in actual practice as a (b)

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the day of

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) and that

the said

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

RETREAT, NEAR YORK.

Medical Certificate.

I the undersigned, being a Bachelor of Medicine of the University of Aberdeen, and being in actual practice as a Physician, hereby certify that I, on the twentyeighth day of September 1874, at Millbrook Eccleston, near Saint Helens, in the County of Lancaster, separately from any other medical practitioner, personally examined Isaac Leather, of Beach Lawn, Waterloo situate near Liverpool in the County of Lancaster, Wine Merchant, and that the said Isaac Leather is a person of unsound mind, and a proper person to be taken charge of and detained under care and treatment, and that I have formed this opinion upon the following grounds, viz:—

1. Facts indicating insanity observed by myself
He does not know the day of the week or month.
He is constantly talking in a loud excited manner, and repeats the same questions and anecdotes over and over again to the same person. His appearance indicates great excitement and agitation.

2. Other facts indicating insanity communicated to me by others. I am informed by his wife, Mary Leather, that he is extremely restless at night, when he wanders about the room continually, opens and shuts the windows and talks in a loud voice.

Charles F. Newcombe,
County Asylum
Rainhill, near Prescot
Lancashire.

Dated this twenty-eighth day of September one thousand eight hundred and seventy-four.

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

578

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

579

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the birth of the patient? Liverpool

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Average Intellectual faculties

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Went to ordinary Public Schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

apprenticed for a Cotton Broker, but fell into dissipated habits in early life, but since he was 20 days ago has been very steady

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 26 years, - has five Children eldest 10 years, Youngest 15 months

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

He was not Epileptic

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Business anxieties

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 35 years

15. What has been the duration of the present attack? about ~~2 years~~ 2 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? once — eight months

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Complete — Except memory incomplete

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Lecitte ~~Simple~~ & gradually became worse

19. What were the first decided symptoms of mental aberration? Delusions of wealth

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

he cannot remember anything for five minutes consecutively
has absurd ideas on pecuniary matters

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum? Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. at Munsell House for five months

was discharged improved

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Taking Bromide of Potassium

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

1239 A Robinson

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In Membership by Birth

2. Where was the birth of the patient?

York.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

During infancy, great delicacy, with frequent convulsions.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Usually of happy disposition - but exhibiting when under excitement considerable violence of temper. Rather under average of natural understanding.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Yes. - He attended a private day School regularly from the age of five (with the exception of one year's instruction at home) till he went to Rawson when nearly Ten, at which School he remained one Year & a Quarter and left on account of the Epileptic attacks becoming more frequent.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Impulsive in his habits.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

with Epileptic -

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No: - except frequent recurrence of fits in childhood.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

580

14. At what age was the patient first attacked with symptoms of insanity?

about 9¼ years

15. What has been the duration of the present attack?

Four Years.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Has had seizures of Epilepsy frequently during that time.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

During the first year the intervals between the attacks was complete. Latterly, incomplete.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Attack commenced coincident with the Epilepsy.

19. What were the first decided symptoms of mental aberration?

occasional violence towards others and peculiarity of conduct.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

He has no permanent delusions.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Yes - occasional violence towards others.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

no.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

no.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Has been taking Bromide of Potassium

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing. Attacks occur at irregular intervals.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Christopher Robinson
3, Belle Vue Terrace
Heslington Road
York.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Alfred Robinson

whom I last saw at No. 3. Belle Vue Terrace, York,

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind.

on the Ninth day of October, 1874. (*)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Alfred Robinson.

Signed, *Name,* Christopher Robinson

Occupation (if any), Grocer

Place of Abode, York.

Degree of Relationship (if any), or other circumstance of connection with the Patient Father.

Dated this ninth Day of Tenth Month

One Thousand Eight Hundred and Seventy Four. –

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Alfred Robinson.
Sex and Age	Male – Thirteen Years and a Quarter.
Married, Single, or Widowed	Single.
Condition of Life, and previous Occupation (if any)	Son of a Grocer.
Religious persuasion, as far as known	Society of Friends.
Previous Place of Abode	3 Belle Vue Terrace, York.
Whether First Attack	Yes.
Age (if known) on First Attack	Nine Years of age.
When and where previously under Care and Treatment	under private care only.
Duration of existing Attack	Four Years.
Supposed Cause	unknown
Whether subject to Epilepsy	– Yes. –
Whether Suicidal	– no.
Whether Dangerous to others	Occasionally, when under excitement.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none.
Name and Address of Relative to whom Notice of Death to be sent	Christopher Robinson, 3 Belle Vue Terrace, Islington Road, York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Christopher Robinson.

Occupation (if any),

Place of Abode,

Degree of Relationship (if any), or other circumstance of connexion with the Patient

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Hicks Hawkswell being a (a) Member of the Royal College of Surgeons of London & and being in actual practice as a (b) Surgeon hereby certify that I, on the eighth day of October 1874 at (c) Bellevue Terrace York in the County of York separately from any other Medical Practitioner, personally examined Alfred Robinson Son of Christopher Robinson of (d) High Ousegate York Grocer, and 3 Bellevue Terrace and that the said Alfred Robinson is a (e) person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Both his whole manner and expression denote a unsound mind weakened by Epileptic attacks.

2. Other facts (if any) indicating Insanity communicated to me by others (g) by his Mother. Both by blood poisoning he struck her a violent blow on the face 15 years since — his Father says that he has attacked a Shipman of his and wounded him in the head, and that very recently he made an attack on a Youth and nearly blinded him

Signed, Name, J. H. Hawkswell

Place of Abode, 38 Bootham York

Dated this eighth day of October One Thousand Eight Hundred and Seventy four

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon or apothecary, as the case may be

(c) Here insert the street and number of the house, (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William York being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the ~~Eighth~~ 8th day of October 1874 at (c) 15 Castlegate York in the County of York separately from any other Medical Practitioner, personally examined Alfred Robinson. Son of Christopher Robinson of (d) High Ousegate York, Grocer and that the said Alfred Robinson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Severe Epileptic fits Deficiency to himself — attraction of temper very violent & excitable — his condition mind can & attention by Act is evidently in a unsound manner

2. Other facts (if any) indicating Insanity communicated to me by others (g) his father informs me that he has struck his Mother

Signed, Name, S W York

Place of Abode, 15 Castlegate York

Dated this 8th day of October One Thousand Eight Hundred and Seventy four

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

No. 1253

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership by birthright

2. Where was the birth of the patient?

Gildersome nr Leeds

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No material change has taken place

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

There does not appear to be any hereditar predisposition to insanity — a nephew is now at the Retreat

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The first attack followed a severe illness — and some degree of mental weakness has always since been apparent

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 37 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

I do not know, but the previous answers given on first admission will doubtless give the information

15. What has been the duration of the present attack?

about three months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

there have been two previous attacks but I cannot state the duration of each attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

The intervals were marked by great peculiarity of habits — more than twenty years since Ed was last placed under care

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

I cannot answer as to previous attacks - in the present case there has been a large amount of irritability and for some time almost total absence of sleep

19. What were the first decided symptoms of mental aberration?

Incessant and incoherent talking
Going out at night under supposed sense of religious duty

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? Is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Ed's mind has been mostly affected on religious topics she believes herself called to visit India and America

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Ed is not liable to attacks of violence, nor has she made any attempt to injure any one

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

On the contrary she always has food before her and constantly requires fresh supplies, though small in quantity she has made no attempt to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

I believe quite good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Ed has been in bed for about two weeks but her friends consider she is in good bodily health

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Ed has been under care at the Retreat twice the second time with great benefit

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Ed has been attended to by an experienced nurse but has seemed to require ordinary medical treatment

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be increasing - and there have been no lucid intervals - any opposition to her plans causes great excitement

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas C. Lindsey
78 Yorkshire St
Rochdale Lane

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Esther Lindsey of Marriage Green whom I last saw at Brighouse on the eleventh day of July 1875 (*) a (a) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Esther Lindsey

Signed, *Name,* J. C. Lindsey

Occupation (if any), Chemist & Druggist

Place of Abode, Rochdale Lane;

Degree of Relationship (if any), or other circumstance of connection with the Patient } Nephew of Esther Lindsey

Dated this twelfth Day of July

One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Esther Lindsey
Sex and Age	Female 69 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Spinster
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	Brighouse Yorkshire
Whether First Attack	Not the first
Age (if known) on First Attack	I do not know precisely, about 34 yrs
When and where previously under Care and Treatment	about 1840, at the Retreat York
Duration of existing Attack	three months
Supposed Cause	I cannot assign any special cause
Whether subject to Epilepsy	not at all
Whether Suicidal	no symtoms of such a tendency
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	J. C. Lindsey 78 Yorkshire St. Rochdale Lane

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Thomas Cooper Lindsey

Occupation (if any), Chemist & Druggist

Place of Abode, 78 Yorkshire St. Rochdale

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Nephew of Esther Lindsey

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Robert Farrer
being a (a) M.R.C.P.E. M.R.C.S. Eng. L.A.C. Lond.
and being in actual practice as a (b) a General Practitioner
hereby certify that I, on the thirteenth day of ~~April~~ July 1875
at (c) Waring Green Brighouse,
in the County of York separately from any other Medical Practitioner,
personally examined Esther Lindsey,
of (d) Waring Green, Brighouse, a Gentlewoman, and that
the said Esther Lindsey
is a (e) of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
My observation for many years past of the generally deranged state of her mind, irrational conversation, the topics of her conversation generally and a religious matter.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
a great disposition to wander out of doors at night time: information derived from Mary Firth of Brighouse

Signed, *Name,* Robert Farrer.
Place of Abode, Spring Villa Brighouse

Dated this thirteenth day of ~~April~~ July 1875 One Thousand Eight Hundred and Seventy five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Henry Pritchett
being a (a) Member of the Royal College of Surgeons, England
and being in actual practice as a (b) Surgeon & Apothecary
hereby certify, that I on the thirteenth day of July 1875
at (c) Waring Green Brighouse
in the County of York separately from any other Medical Practitioner,
personally examined Esther Lindsey
of (d) Waring Green, Brighouse, Gentlewoman and that
the said Esther Lindsey
is a (e) person of Unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Incessant incoherant rambling talk.
She thinks that she is born to be the means of saving thousands upon thousands of thousands of persons from hell.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
That she turns night into day & goes to bed at eight in the morning ×

× I obtained this information from Mary Firth who resides with Esther Lindsey of Waring Green, Brighouse
H. Pritchett.

Signed, *Name,* Henry Pritchett
Place of Abode, The Poplars Rastrick

Dated this thirteenth day of July One Thousand Eight Hundred and Seventy five

No 1254

Barnwood House Institution, Gloucester.

16 and 17 Vict., Chap. 96; and 25 and 26 Vict., Chap. 111.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Schedule (A) No 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive my husband William Lidbetter whom I last saw at Hydropathic Establishment, Limpley Stoke near Bath on the 31st day of March 1875 (*) a (b) person of unsound mind as a patient into your Hospital.

(a) Within one month previous to the date of order.

(b) Lunatic, or idiot, or person of unsound mind.

Subjoined is a statement respecting the said William Lidbetter

Signed, *Name*, Ann Lidbetter

Occupation, (if any),

Place of Abode, No 20 Braithwaite Rd Birmingham

Degree of Relationship (if any) or other circumstances of connexion with the patient } Wife

Dated this 31st day of March

One thousand Eight Hundred and Seventy five.

To Dr. Needham,

Superintendent of Barnwood House Institution, Gloucester.

STATEMENT.

(*If any Particulars in this Statement be not known, the Fact to be so stated.*)

Name of Patient, and Christian Name, at length	William Lidbetter
Sex and Age	67 years of age
Married, Single, or Widowed	Married
Condition of Life, and Previous Occupation (if any)	Cashier & Bookkeeper
The Religious Persuasion, as far as known	One of the Society of Friends
Previous Place of Abode	Birmingham
Whether first Attack	First attack
Age (if known) on first Attack	66
When and where previously under Care and Treatment	Has been at home & at Hydropathic Establishment
Duration of existing Attack	About 2 years
Supposed Cause	Domestic troubles
Whether subject to Epilepsy	No
Whether Suicidal	No, not to my belief
Whether dangerous to others	No, not in my opinion
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Never undergone any examination
Special circumstances (if any) preventing the Patient being examined before Admission separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death is to be sent	Ann Lidbetter his wife 20 Braithwaite Rd Birmingham.

Signed, *Name*, Ann Lidbetter

Where the Person signing the Statement is not the Person who signs the Order, the following Particulars concerning the Person signing the Statement are to be added.

Occupation (if any),

Place of Abode,

Degree of Relationship (if any) or other circumstances of connexion with the Patient,

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(See Marginal Notes.)

MEDICAL CERTIFICATE.—*Sched.* (*A*) *No.* 2, *Sects.* 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Nath[l] Pearson being a (a) Licentiate of the Apothecary's Company and being in actual practice as a (b) General Practitioner hereby certify, that I, on the First day of April 1875 at (c) Hydropathic Establishment, Limpley Stoke in the County of Wiltshire separately from any other Medical Practitioner, personally examined (d) William Tidbetter, Bookkeeper Cashier of 20 Braithwaite Road Birmingham and that the said William Tidbetter is a (e) person of unsound mind and a proper Person to be taken charge of and detained under care and treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself. (f) Change of character habits & former self. Mental restlessness unable to remain quiet & unable to move about. Threatening injury to others incoherent wandering conversation & inability to concentrate his thoughts & apparently delusions

2. Other facts (if any) indicating Insanity communicated to me by others. (g) using improper language. Swearing & other imprecations contrary to his former habits which were mild & temperate—by Mrs Tidbetter

Signed, Nath[l] Pearson

Place of Abode, Hydropathic Establishment, Limpley Stoke

Dated this 2nd day of April One Thousand Eight Hundred and Seventy five

(a) *Here set forth the qualification entitling the Person certifying to practise as a Physician, Surgeon, or Apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London.

(b) Physician, Surgeon, or Apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any) or other like particulars.*

(d) *A. B. of* ——, *insert residence, and profession, or occupation (if any).*

(e) Lunatic, or an idiot, or a Person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

(See Marginal Notes.)

MEDICAL CERTIFICATE.—*Sched.* (*A*) *No.* 2, *Sects.* 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel Morgan being a (a) Graduate of the University of St Andrews and being in actual practice as a (b) Physician hereby certify, that I, on the Seventh day of April 1875 at (c) 46 Rivers Street, Bath in the County of Somerset separately from any other Medical Practitioner, personally examined (d) William Tidbetter, Cashier of Birmingham, now 20 Braithwaite Road and that the said William Tidbetter is a (e) person of unsound mind and a proper Person to be taken charge of and detained under care and treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) Great excitement & incoherence. Inability to control himself.

2. Other facts (if any) indicating Insanity communicated to me by others (g) by Mr White Smith who says that he Mr William Tidbetter threatens to commit Suicide, & he is obliged to be constantly watched

Signed, Samuel Morgan

Place of Abode, 46 Rivers St Bath

Dated this Seventh day of April One Thousand Eight Hundred and Seventy five

(a) *Here set forth the qualification entitling the Person certifying to practise as a Physician, Surgeon, or Apothecary, ex. gra.*—Fellow of the Royal College of Physicians in London.

(b) Physician, Surgeon, or Apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any) or other like particulars.*

(d) *A. B. of* ——, *insert residence, and profession, or occupation (if any).*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information and from whom.*

It is particularly requested that one of the certifying Medical Men, or the person best acquainted with the Patient, will answer the following questions as fully as possible.

---

1. Was there any peculiarity in connexion with the Patient previously to or at birth? ...
2. Was any peculiarity observable in the Patient during childhood and youth, or was he generally strong and healthy in mind and body? ...
3. What is the patient's natural temper and disposition, and favourite pursuit and tendency? Has he led an active or a sedentary life?... ...
4. Has he always been temperate and industrious?...
5. Has he ever suffered from any serious disease, and is he subject to any particular constitutional or bodily ailment?... ... ...
6. Has he at any time undergone any serious disappointment or reverse, pecuniary or otherwise?
7. Has any blow or other injury ever been received on the back or head? ... ...
8. Has any relation or family connexion been known to be insane, or of weak mind, or eccentric, and if so, which of them?... ... ...
9. Has any near relation been habitually intemperate?
10. How many previous attacks of insanity has the Patient had, what period elapsed between each, how long did they last, and where was he treated?
11. Before the Patient manifested the symptoms of insanity, did he suffer from loss of sleep or appetite or exhibit any change in temper and disposition?
12. What circumstances are supposed to have caused the mental disorder? ... ...
13. In what manner has insanity shown itself? ...
14. Is the Patient violent towards h self or others, and in what way? Or has he broken glass, or furniture, torn clothes or bedding, or done mischief of any kind? ... ...
15. Has he, at any period of the disorder, been of dirty habits? ... ...
16. Has he threatened or attempted self-destruction; if so, when, and by what means?... ...
17. Has he refused food at any time? ... ...
18. Has he ever had fits of any kind, or been paralysed?
19. Is the Patient's bodily health good, bad or indifferent?
20. Has he been under medical treatment, and under whose care? ... ...
21. Has he been subjected to personal restraint? ...
22. Up to what time has he continued h ordinary employment? ... ...

I certify that this is a true copy of the order & certificates upon which Mr Lom Lisbetter was admitted into Barnwood House - that he is in apt state of health to be removed.

July 19th 1875

Ret Needham. MD
Medical Superintendent

Signed, _____

Place of Abode, _____

Date, _____ 18

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(*Copy of Notice to Commissioners in Lunacy.*)

PRIVATE PATIENT.

(25 and 26 Vict. Chap. 111, Sec. 28.)

STATEMENT.

I have this day (a) seen and examined _____

_____

a Private Patient received on the _____ day of _____ 18___

pursuant to an order dated the _____ day of _____ 18___

and hereby certify that with respect to mental state he _____

_____

_____

_____

and that with respect to bodily health and condition he _____

_____

_____

_____

Signed, _____

Medical Officer of Barnwood House Institution, Gloucester.

Dated this _____ day of _____ one

thousand eight hundred and _____

To the Commissioners in Lunacy.

(a) After two clear days and before the expiration of seven clear days from the Admission of the Patient.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 27th day of July 1875, of William Lidbetter a Private Patient in Barnwood House, Gloucester to the Friends ~~House~~ Retreat, York

Given under our hands this 12th day of July in the year of Our Lord One Thousand Eight Hundred and Seventy - five

Grville Howard
James Wilkes
Commissioners in Lunacy.

ORDER.

I,* Ann Lidbetter the undersigned having Authority to discharge William Lidbetter a Private Patient in Barnwood House, Gloucester

hereby order and direct that the said William Lidbetter be removed therefrom to the Friends Retreat, York

Given under my hand this* 13th day of July in the year of Our Lord One Thousand Eight Hundred and Seventy - five

(Signed) Ann Lidbetter

Place of Abode 20 Braithwaite Rd Birmingham

This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

1. The person who *signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
268—(133)

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No. 1255

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Arthur Joseph Sams

whom I last saw at Mrs Hobson's Cottage Thorpe near York

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the 30th day of July 1875 (a)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Arthur Joseph Sams

Signed, *Name,* Sophia Elizabeth Sams

Occupation (if any), Widow

Place of Abode, 7 Woodhill Portishead Somerset

Degree of Relationship (if any), or other circumstance of connection with the Patient Mother

Dated this 30th Day of July 75

One Thousand Eight Hundred and Seventy 5

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Arthur Joseph Sams
Sex and Age	male – 20 –
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Son of a Banker. no occupation
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	7 Woodhill Portishead Somerset
Whether First Attack	Yes
Age (if known) on First Attack	From Birth
When and where previously under Care and Treatment	1873 at Ladywood
Duration of existing Attack	Since Childhood
Supposed Cause	Unknown
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Sophia E Sams

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Sophia Elizabeth Sams

Occupation (if any), Widow

Place of Abode, 7 Woodhill Portishead

Degree of Relationship (if any), or other circumstance of connexion with the Patient Mother

618

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 30th day of July
at (c) the House of Joseph Quarton 1 Belle Vue Terrace York
in the County of York separately from any other Medical Practitioner,
personally examined Arthur Joseph Sams
of (d) 7 Woodhill Portishead Somerset and that
the said Arthur Joseph Sams
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Imbecility which renders him unfit for the ordinary duties of life or to take care of himself. He can sustain no rational conversation.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S. W. North
Place of Abode, Castlegate York
Dated this 30th day of July One Thousand Eight Hundred and Seventy five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Noble
being a (a) M. R. C. S. & L. A. C. London
and being in actual practice as a (b) General Practitioner
hereby certify, that I on the 30th day of July 1875
at (c) 48 Micklegate York
in the County of York separately from any other Medical Practitioner,
personally examined Arthur Joseph Sams
of (d) 7 Woodhill Portishead Somerset and that
the said Arthur Joseph Sams
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

An imbecile and unable to sustain any conversation.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* John Noble
Place of Abode, 48 Micklegate
Dated this 30th day of July One Thousand Eight Hundred and Seventy five.

No. 1256

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Amy Gertrude Gray.

whom I last saw at The Rookery New Ferry

on the Sixteenth day of August 1875 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Amy Gertrude Gray

Signed, *Name,* Henry Gray

Occupation (if any), Merchant

Place of Abode, The Rookery New Ferry

Degree of Relationship (if any), or other circumstance of connection with the Patient Husband

Dated this Sixteenth Day of August

One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Amy Gertrude Gray
Sex and Age	Female 27 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	wife of manufacturer —
Religious persuasion, as far as known	Church of England
Previous Place of Abode	The Rookery New Ferry Cheshire —
Whether First Attack	yes
Age (if known) on First Attack	Twenty seven
When and where previously under Care and Treatment	No where
Duration of existing Attack	Three weeks.
Supposed Cause	Child Birth
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	Yes -
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Henry Gray The Rookery New Ferry,

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Gray

Occupation (if any), Merchant & Manufacturer

Place of Abode, The Rookery New Ferry Cheshire —

Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband.

620

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon or apothecary, *as the case may be*

(c) *Here insert the street and number of the house, (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

MEDICAL CERTIFICATE.

(a) Set forth the qualifications entitling the person certifying to practise as a Physician, Surgeon, or Apothecary, *viz.* gra:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

I, the undersigned, William Thomas Hamilton being a (a) Registered Surgeon Licentiate of the Royal College of Surgeons Ireland

(b) Physician, Surgeon, or Apothecary, as the case may be.

and being in actual practice as a (b) Surgeon, hereby certify that I, on the fifteenth day of August 1875

(c) Here insert the street and number of the house (if any) or other like particulars.

at (c) The Rookery - New Ferry in the County of Chester, respectively from (d) any other Practitioners

(d) In any case where more than one medical certificate is required by this Act, here insert separately from any other medical practitioner.

personally examined Amy Gertrude Gray of (e) The Rookery New Ferry County of Chester wife of Henry Gray and that the said Amy Gertrude Gray

(e) Insert residence and profession or occupation (if any) of the patient.

(f) Lunatic, or an Idiot, or a person of unsound mind.

is a (f) Person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(g) Here state the facts.

1. Facts indicating Insanity observed myself (g) Rambles in an incessant and incoherent Manner and behaves wildly and irrationally

2. Other facts (if any) indicating Insanity communicated to me by others (h). Her Husband informs me that she has various delusions such as imagining herself a member of the Royal Family and her Nurse Mrs Owen informs me she is very destructive of her Property

(h) Here state the information, and from whom.

(Signed) *Name* William Thomas Hamilton

Place of Abode The Elms Rock Ferry Cheshire

Dated this fifteenth day of August

One Thousand Eight Hundred and seventy five

MEDICAL CERTIFICATE.

(a) Set forth the qualifications entitling the person certifying to practice as a Physician, Surgeon, or Apothecary, ex. gra:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

I, the undersigned, William Main being a (a) Registered M.D. and Licentiate of the Royal College of Surgeons Edin.

(b) Physician, Surgeon, or Apothecary, as the case may be.

and being in actual practice as a (b) Physician & Surgeon hereby certify that I, on the fifteenth day of August 1875

(c) Here insert the street and number of the house (if any) or other like particulars.

at (c) The Rookery - New Ferry - in the County of Chester, separately from any

(d) In any case where more than one medical certificate is required by this Act, here insert separately from any other medical practitioner.

(d) other Practitioner personally examined Amy Gertrude Gray

(e) Insert residence and profession or occupation (if any) of the patient.

of (e) The Rookery - New Ferry - wife of Henry Gray

and that the said Amy Gertrude Gray

(f) Lunatic, or an Idiot, or a person of unsound mind.

is a (f) person of unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

(g) Here state the facts.

1. Facts indicating Insanity observed myself (g) talks incoherently; & behaves in a wild, strange, & unreasonable manner

(h) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (h). subject to delusions, & to violent impulses; destroyed pictures she formerly valued; put her watch in water; stated that she was the Queen of Heaven; &c. as related to me by her Husband - Henry Gray - her sister - Ida Spooner - & her Nurses Mrs Arkell and Mrs Owen -

(Signed) Name Wm Main M.D.

Place of Abode New Ferry - Birkenhead.

Dated this fifteenth day of August One Thousand Eight Hundred and seventy five -

622

No 1254

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Caroline Alice Simon whom I last saw at Rose Cottage Fulford near York on the 17th day of September 1875 (c) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Caroline Alice Simon

Signed, *Name,* Caroline Schwabe.
Occupation (if any),
Place of Abode, Rose Cottage Fulford York
Degree of Relationship (if any), or other circumstance of connection with the Patient friend

Dated this 17th Day of September
One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Caroline Alice Simon
Sex and Age	female 20.
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	daughter of Mrs Simon of Ealing
Religious persuasion, as far as known	Episcopalian
Previous Place of Abode	5 Kent Gardens Ealing - London
Whether First Attack	No
Age (if known) on First Attack	not known
When and where previously under Care and Treatment	at home
Duration of existing Attack	3 or 4 weeks
Supposed Cause	Physical exhaustion
Whether subject to Epilepsy	No
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Henrietta Simon - 5 Kent Gardens Ealing. Caroline Schwabe - Rose Cottage Fulford

(d) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (d) Caroline Schwabe
Occupation (if any),
Place of Abode, Rose Cottage Fulford York
Degree of Relationship (if any), or other circumstance of connexion with the Patient Friend

623

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned William Draper

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons. Engd

(b) Physician, surgeon or apothecary, as the case may be

and being in actual practice as a (b) Surgeon

hereby certify that I, on the seventeenth day of September

(c) Here insert the street and number of the house, (if any), or other like particulars.

at (c) the house of Caroline Schwabe, Rose Cottage, Fulford

in the County of York. separately from any other Medical Practitioner,

personally examined Caroline Alice Simon - Englishwoman.

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) 5 Kent Terrace - Ealing - London and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Caroline Alice Simon

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Her expression is anxious and melancholy. She is incoherent in conversation - She says that she is afraid to take food, because it is poisoned —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Draper. M.R.C.S. & L.R.C.P.

Place of Abode, 25. Petergate - York.

Dated this seventeenth day of September One Thousand Eight Hundred and Seventy-first.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Samuel William York

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons London

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the 17th day of September 1875

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) the house of Charlotte Schwabe Rose Cottage Fulford

in the County of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Caroline Alice Simon. Single woman

of (d) 5 Kent Terrace Ealing London and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Caroline Alice Simon

is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Rambling incoherent conversation

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, S. W. York

Place of Abode, York

Dated this 17th day of Sept One Thousand Eight Hundred and Seventy five

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

No. 1958.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

In membership all her life

2. Where was the birth of the patient?

at Eastham, in Essex.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

No peculiarity - good intellectual powers

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

She was sent to a private school at Plaistow at the early age of 3 owing to the death of her mother, where she remained till 12 yrs old - then went to Ackworth for 2 years

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Teaching - has been industrious temperate and careful in her habits

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at 47 - no children

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

no.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Gradually advancing infirmity of age

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

No exact time - loss of memory has gradually come on during the last 3 years.

15. What has been the duration of the present attack?

See above

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

No previous attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

See above

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No elevation or depression of spirits &c. observed

19. What were the first decided symptoms of mental aberration?

Forgetfulness of persons and places

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Imagines every day meeting day and prepares to go - is anxious for meals very soon after they have been partaken of - believes the house and furniture she is in her own - puts away articles in what she considers safe places - most occurrences forgotten within a minute -

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Clean and neat, if properly looked after

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes, except a slight cold

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Not at all

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

No means, beyond endeavouring to soothe and treat judiciously.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Stationary - the more obvious symptoms are not constant but exhibited at uncertain intervals.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Samuel Hare, 10 Cleveland Parade Darlington

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Robinson formerly of Ash Cottage Maidstone now of 10 Cleveland Parade Darlington whom I last saw at ~~10 Cleveland Parade~~ Darlington on the twentieth day of ninth Month 1875 (*) a (b) person of unsound mind, as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Ann Robinson

Signed, Name, Samuel Hare
Occupation (if any), Accountant
Place of Abode, 10 Cleveland Parade Darlington
Degree of Relationship (if any), or other circumstance of connection with the Patient } Nephew (by marriage)

Dated this twentieth Day of ninth Month
One Thousand Eight Hundred and Seventy five.

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Ann Robinson
Sex and Age	Female - age nearly 77
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Schoolmistress previous to her marriage
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Maidstone
Whether First Attack	Yes
Age (if known) on First Attack	about 74
When and where previously under Care and Treatment	not at all
Duration of existing Attack	about 3 years
Supposed Cause	Infirmity of age
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	—
Name and Address of Relative to whom Notice of Death to be sent	Samuel Hare 10 Cleveland Parade Darlington

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (*) Samuel Hare
Occupation (if any), Accountant
Place of Abode, 10 Cleveland Parade Darlington
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Nephew (by marriage)

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Rimington Fotherjie

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Medical Graduate of the University of St Andrews &c

(b) Physician, surgeon or apothecary, as the case may be

and being in actual practice as a (b) Physician

hereby certify that I, on the Fifteenth day of September

(c) Here insert the street and number of the house, (if any), or other like particulars.

at (c) 10 Cleveland Parade Darlington

in the County of Durham separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Mrs Ann Robinson

of (d) 10 Cleveland Parade Darlington and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Mrs Ann Robinson

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Loss of memory for recent events. She cannot tell the day of the week or the month. Thinks it is always Sunday and time to go to meeting. Says she has never been married although her husband is living. Says she is not at Darlington but at Sunderland. Repeats incidents of her earlier life many times in a few minutes. On entering the room for the first time (2) and returning she had no recollection of seeing me before

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mrs Caroline Hare states that she is irritable and when she does not get her own way sometimes ~~must~~ strikes. That she leaves off important parts of her dress, and puts her things on in wrong order. She frequently secretes spoons and other things in her drawers. Takes boys from the Children and declares they are hers

Signed, Name, John Rimington Fotherjie

Place of Abode, Darlington

Dated this 17th day of September One Thousand Eight Hundred and Seventy five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Henry Robert Irwin

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) ~~Surgeon~~ Licentiate of the Faculty of Physicians and Surgeons of Glasgow

and being in actual practice as a (b) Surgeon

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the eighteenth day of September

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) 10 Cleveland Parade Darlington

in the County of Durham separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Mrs Ann Robinson

of (d) 10 Cleveland Parade Darlington and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Mrs Ann Robinson

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Does not know whether or no she has been married. Thinks Mrs Ab is her niece with whom she is living is an old schoolfellow but forgets her name. Thinks this year is 1840. Says she does not live here but has a house in Town.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs Caroline Hare says

She can get her tea much as she likes & does she will scarcely ever walks any distance or purpose as to which she is wrong. Has no peculiar notions as to dress, will put on as many as five caps at once. Thinks Children's boys are to valuable to be played with. Does take them from them & carefully puts them away

Signed, Name, Henry R. Irwin

Place of Abode, Arcade House Darlington.

Dated this 18th day of Sept. One Thousand Eight Hundred and Seventy five.

No. 1954.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the birth of the patient? 28 St Saviourgate York

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? No

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Public School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Plain Matter Very Temperate & industrious

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Not Married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Yes

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Fall from Steps Injury to the Head

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

26 Years of age

15. What has been the duration of the present attack?

3 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First time 2 years ago of 3 months duration

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

1 Year & nine months

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

No

19. What were the first decided symptoms of mental aberration?

Sleeplessness & mental excitement

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Religious

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Clean

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Indestion

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

for 3 months North Riding asylum

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Treatment at the above

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Returns after Fits

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mrs Mary Elizabeth Webster 9 St Saviourgate York

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive James Ralph Webster

whom I last saw at 29 St Saviourgate York on the 16th day of Oct 1875 (*)

(a) Within one week previous to the date of the order. (b) Lunatic, or an Idiot, or a person of unsound mind.

a (b) Lunatic as a Patient in your House.

Subjoined is a statement respecting the said James Webster

Signed, *Name,* Mary E Webster

Occupation (if any), Wife

Place of Abode, 29 St Saviourgate York.

Degree of Relationship (if any), or other circumstance of connection with the Patient Mother

Dated this 16th Day of Oct 1875

One Thousand Eight Hundred and Seventy Five

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	James Ralph Webster
Sex and Age	Male aged 28 Year
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Plain Matter
Religious persuasion, as far as known	Independant
Previous Place of Abode	29 St Saviourgate
Whether First Attack	no
Age (if known) on First Attack	26 Years
When and where previously under Care and Treatment	North Riding asylum . December 1873
Duration of existing Attack	3 days
Supposed Cause	Fits
Whether subject to Epilepsy	Yes
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	no
Name and Address of Relative to whom Notice of Death to be sent	Mary Webster 29 St Saviourgate York

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Thos Webster

Occupation (if any), Traveller

Place of Abode, 62 Union Terrace York.

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon *or* apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned John Ingham Fearby Marshall being a (a) Member of the Royal College of Surgeons and being in actual practice as a (b) Surgeon hereby certify that I, on the sixteenth day of October 1875 at (c) 9 St Saviourgate, York in the County of York separately from any other Medical Practitioner, personally examined James Ralph Webster of (d) 9 St Saviourgate Spring Blind Manufacturer and that the said James Ralph Webster is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He has many delusions; at times excited & wild. sees object in the air, & says the heavens open for him to go up; the last night he made a steam engine which he has now at work

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs Webster his mother says he threw up the window & it was with difficulty he was prevented going out

Signed, *Name,* John F. Marshall
Place of Abode, 38 St Saviourgate

Dated this sixteenth day of October One Thousand Eight Hundred and Seventy five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, Edward Allen being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify, that I on the 16th day of Oct 1875 at (c) No. 9. St Saviourgate. York in the County of York separately from any other Medical Practitioner, personally examined James Webster Spring Blind Manufacturer of (d) 9 St Saviourgate, York and that the said James Webster is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

James Ralph Webster
E.L.

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) He says he has been to Heaven & saw there a well of Harrogate water.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Edward Allen
Place of Abode, 19 St Saviourgate York

Dated this 16th day of Oct One Thousand Eight Hundred and Seventy — five

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 21st day of January 1876, of James Ralph Webster a Private Patient in the Friends' Retreat, ~~House~~, York

to the North Riding of York County Lunatic Asylum ~~House~~

Given under our hands this 6th day of January in the year of Our Lord One Thousand Eight Hundred and Seventy-six

John D Keaton
Greville Howard
Commissioners in Lunacy.

ORDER.

I,* Mary E. Webster the undersigned having Authority to discharge James Ralph Webster a Private Patient in the Friends' ~~House~~, Retreat, York

hereby order and direct that the said James Ralph Webster be removed therefrom to the North Riding of York County Lunatic Asylum ~~House~~

Given under my hand this* 7 day of January in the year of Our Lord One Thousand Eight Hundred and Seventy-six

(Signed) Mary Elizabeth Webster

Place of Abode 9 St Saviourgate York

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
268—(333)

629

No. 1260.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? he has travelled for Bryant & May

2. Where was the birth of the patient? Port Isaac Cornwall

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? not that I ever heard

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? vigourous mind in youth good disposition

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? chiefly self taught

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. grocer steady & persevering in youth has occasionally taken stimulants in excess when much occupied in business.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. married age 32.3 Children eldest 4 youngest 6 days

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? when young literature in general fond of business

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? no

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? fits supposed to be epileptic occasionally for the last 4 years

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? not any

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane? not that I have ever heard

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? business worry and anxiety last persons should build and injure his property

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

630

14. At what age was the patient first attacked with symptoms of insanity? 40 2 40th

15. What has been the duration of the present attack? 6 or 6 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
unstable of times occasional depression for the last year unstable in business for years

19. What were the first decided symptoms of mental aberration?
one the subject of matches

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Riches and going to be a great man

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? broken a bonnet & threatened to throw things at myself and and Papers at others

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
talking of destroying himself if he had not his own way in every thing

23. What are the habits of the patient as regards personal cleanliness and decorum?
most particular

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. indigestion and nervous debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No

26. What medical, or other means have been used for the recovery of the patient, and with what effect?
been under medical treatment & taken Chloral hydrate at night in moderat doses with temporary benefit

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
rather increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Jos Adams
Claudon House
Keynsham
near Bristol

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Edwin Adams

whom I last saw at Chandos House

on the 22 day of November 1875 (a)

a (b) a person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Edwin Adams

Signed, *Name,* Elizabeth Cobbledick

Occupation (if any), married woman

Place of Abode, Heworth Green York

Degree of Relationship (if any), or other circumstance of connection with the Patient Wifes Sister

Dated this twenty second Day of November

One Thousand Eight Hundred and Seventy 75

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Edwin Adams
Sex and Age	Male 42
Married, Single, or Widowed	married
Condition of Life, and previous Occupation (if any)	Comercial traveler
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Reading
Whether First Attack	yes
Age (if known) on First Attack	42
When and where previously under Care and Treatment	—
Duration of existing Attack	5 to 6 days
Supposed Cause	business worry + excitement
Whether subject to Epilepsy	yes
Whether Suicidal	yes
Whether Dangerous to others	rather doubtful
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	no
Name and Address of Relative to whom Notice of Death to be sent	Susan Adams Chandos House Keynsham near Bristol

(a) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (a) Elizabeth Cobbledick

Occupation (if any), married women

Place of Abode, Heworth Green York

Degree of Relationship (if any), or other circumstance of connexion with the Patient Wifes Sister

631

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel Bryant

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the Royal College of Surgeons of England

(b) Physician, surgeon or apothecary, as the case may be

and being in actual practice as a (b) Surgeon

hereby certify that I, on the twenty first day of November 1875

(c) Here insert the street and number of the house, (if any), or other like particulars.

at (c) Chandos House Keynsham

in the County of Somerset separately from any other Medical Practitioner,

personally examined Edwin Adams

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Chandos House Keynsham Commercial Traveller and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Edwin Adams

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) That he was very excited and restless, that he said he was a person of great wealth and importance making many pounds pounds to be very rich was about to purchase all the Banks and Stores and many of the newspapers and shops

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) From Mrs Cobbledick his landlady Sleepless, very restless nights and very deranged talk sending Telegrams and letters to Persons in Office about matters of business he was not connected with

Signed, Name, Samuel Bryant M.R.C.S. & L.S.A.

Place of Abode, Chandos House Keynsham Somersetshire

Dated this 21st day of November One Thousand Eight Hundred and Seventy five

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Richard Colthurst

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) M.D. of the University of Edinburgh & Member of the Royal College of Surgeons of England

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify, that I on the twenty first day of November 1875

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Chandos House Keynsham

in the County of Somerset separately from any other Medical Practitioner,

personally examined Edwin Adams Commercial Traveller

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Chandos House Keynsham and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Edwin Adams

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Told me he shortly should inherit immense riches he would make a hundred Millions in ten years, would have a hundred Police in Keynsham to guard his Person and Souls that he should be made a Peer in the presence of Royalty — is constantly writing the Lyrics of amusing & unreasonable Songs Writing extraordinary Telegrams to the Mayor of Bristol & various official Persons in London — that he long been much inclined to Drink himself in Bedroom & would if things had not gone right — Sacrificed the Lives of Individuals — Talked of jumping out of the bed room window was violent and ordered him out of the room.

(g) Here state the information, and from whom.

By his nephew Mr John Symons

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, Richd Colthurst M.D.

Place of Abode, Keynsham Nr Bristol

Dated this twenty first day of November One Thousand Eight Hundred and Seventy five

No. 1261.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Not in any way

2. Where was the birth of the patient? Doncaster

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Was rather self willed

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Ordinary abilities

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Has had a first rate education at boarding schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

To be a solicitor, Always well conducted

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Not married

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

Reading for examination

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

Was greatly disappointed that his health broke down and he could not pass for the examination

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

His maternal grandmother was for a time of unsound mind and made several attempts at suicide.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what ~~those of the subsequent and last attacks of mental disorder~~?

Over study and then disappointment

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

22 years

15. What has been the duration of the present attack?

8 or 9 weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Want of sleep for two weeks

19. What were the first decided symptoms of mental aberration?

Fear of some impending danger

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Delusions

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No, but rather obstinate at times

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Cut his throat

23. What are the habits of the patient as regards personal cleanliness and decorum?

Perfectly clean

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Has been very weak, but is improving

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Chloral, opium, bromide of potassium
belladonna, iron, Iron very decided

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Sometimes better & sometimes worse.
No stated periods

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Leonard William Shirley whom I last saw at Regents Terrace, Doncaster, on the Twenty second day of November 1875. (*)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (*) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Leonard William Shirley

Signed, *Name,* W. E. Shirley

Occupation (if any), Solicitor

Place of Abode, Doncaster

Degree of Relationship (if any), or other circumstance of connection with the Patient } Father

Dated this Twenty second Day of November One Thousand Eight Hundred and Seventy-five

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Leonard William Shirley
Sex and Age	Male - Twenty two years.
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Student of Law
Religious persuasion, as far as known	Episcopalian
Previous Place of Abode	Regents Terrace, Doncaster,
Whether First Attack	Yes
Age (if known) on First Attack	Twenty two years
When and where previously under Care and Treatment	
Duration of existing Attack	Eight weeks
Supposed Cause	Over-Study
Whether subject to Epilepsy	No Fits
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	William Edward Shirley Solicitor Doncaster his Father

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) W. E. Shirley

Occupation (if any), Solicitor

Place of Abode, Doncaster

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Father

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Sykes.
being a (a) Doctor of Medicine of the University of Edinburgh.
and being in actual practice as a (b) Physician
hereby certify that I, on the 22 Twenty second day of November
at (c) 7 Regents Terrace Doncaster
in the County of York
separately from any other Medical Practitioner,
personally examined Leonard William Shirley
of (d) Regents Terrace, Student of Law and that
the said Leonard William Shirley
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) nothing more than curt answers and great restlessness

2. Other facts (if any) indicating Insanity communicated to me by others (g)
that he attempted to cut his throat. The wound scarcely healed I say, and is in fear of some calamity

Signed, Name, John Sykes (Margaret Sykes)
Place of Abode, Doncaster (45 Hallgate

Dated this 22 day of November One Thousand Eight Hundred and Seventy Five

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon or apothecary, as the case may be
(c) Here insert the street and number of the house, (if any), or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Alexander Christy Wilson
being a (a) Doctor of Medicine of the University of Edinburgh
and being in actual practice as a (b) General practitioner
hereby certify, that I on the 22nd day of November
at (c) 7 Regents Terrace, Doncaster
in the County of York
separately from any other Medical Practitioner,
personally examined Leonard William Shirley
of (d) Doncaster Law Student Regents Terrace and that
the said Leonard William Shirley
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) He has on his neck traces of a recent self inflicted wound He has a fear that some calamity is impending

2. Other facts (if any) indicating Insanity communicated to me by others (g)
He has frequent delusions that his family is going to suffer in various ways informed by his mother

Signed, Name, A. C. Wilson
Place of Abode, Doncaster

Dated this 22 day of Nov. One Thousand Eight Hundred and Seventy Five

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians and Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

1240 S. Williamson

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity: and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Williamson whom I last saw at my house 22 Belle Vue Street Heslington Road York on the 26th day of 10th Month 1874 (*) as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (*) a person of unsound mind

Subjoined is a statement respecting the said Sarah Williamson

Signed, Name, Sarah Williamson
Occupation (if any), Widow
Place of Abode, 22 Belle Vue Street, Heslington Road, York
Degree of Relationship (if any), or other circumstance of connection with the Patient } Mother

Dated this 26th Day of 10th Month 1°
One Thousand Eight Hundred and Seventy four.

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Williamson
Sex and Age	female 45
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Bonnet Maker
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Belle Vue Street, York
Whether First Attack	No
Age (if known) on First Attack	26
When and where previously under Care and Treatment	The Retreat, York
Duration of existing Attack	two weeks
Supposed Cause	probably intemperance
Whether subject to Epilepsy	No
Whether Suicidal	perhaps so
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Sarah Williamson 22 Belle Vue Street, York.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (*) Sarah Williamson.
Occupation (if any),
Place of Abode, 22 Belle Vue Street, York.
Degree of Relationship (if any), or other circumstance of connexion with the Patient } Mother

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Isaac Mennell Williams.
being a (a) Member of the Royal College of Surgeons, England
and being in actual practice as a (b) Surgeon
hereby certify that I, on the 26th day of October 1874,
at (c) 22 Belle Vue St. Heslington Road, York.
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Williamson, Spinster
of (d) 22 Belle Vue St, Bonnet Maker, and that
the said Sarah Williamson,
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Her general appearance indicates great mental depression. She states she is lost and cannot be saved, she refused her food as she said there was poison in it

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Her attendant Jane Jackson says that she told her this morning she was tired of her life and she should cut her throat —

Signed, *Name,* Isaac Mennell Williams.
Place of Abode, 48 Micklegate, York —

Dated this 26th day of October One Thousand Eight Hundred and Seventy four. —

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Samuel William North
being a (a) Member of the Royal College of Surgeons London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the twenty fifth day of October 1874
at (c) 22 Belle Vue Street Heslington Road York
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Williamson
of (d) 22 Belle Vue Street - Spinster and that
the said Sarah Williamson
is a (e) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Great depression of spirits. Rambling incoherent conversation

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* S W North
Place of Abode, Carlton York

Dated this 26 day of October One Thousand Eight Hundred and Seventy four

1241 F. M. Lyon

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No

2. Where was the birth of the patient?

St. John Street Manchester

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient: that the two medical practitioners who sign the latter shall not be in partnership with each other: that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Frances Mary Lyon whom I last saw at 11 Prospect Place Harrogate on the thirtieth day of October 1874 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Frances Mary Lyon

Signed, *Name,* Thomas Porter Lyon
Occupation (if any), Solicitor and Notary
Place of Abode, Page Moss Knotty Ash near Liverpool
Degree of Relationship (if any), or other circumstance of connection with the Patient Husband of the Patient

Dated this thirty first Day of October
One Thousand Eight Hundred and Seventy four

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Frances Mary Lyon
Sex and Age	Female - Twenty five
Married, Single, or Widowed	Married.
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	a Member of the Church of England
Previous Place of Abode	11 Prospect Place Harrogate
Whether First Attack	First.
Age (if known) on First Attack	Twenty five
When and where previously under Care and Treatment	Never been previously treated.
Duration of existing Attack	Between two and three weeks
Supposed Cause	Child birth
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	I believe not
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Thomas Porter Lyon. Page Moss Knotty Ash near Liverpool.

(a) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (a) Thomas Porter Lyon
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Andrew Scott Nuttle

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Physician & Doctor of Medicine of Edinburgh

(b) Physician, surgeon or apothecary, as the case may be

and being in actual practice as a (b) Physician

hereby certify that I, on the 30th day of October 1874

(c) Here insert the street and number of the house, (if any), or other like particulars

at (c) 11 Prospect Place Harrogate

in the County of York separately from any other Medical Practitioner,

personally examined Frances Mary Lyon

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) 11 Prospect Place and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Frances Mary Lyon

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Total change of manner from being talkative to silence, giving no rational answer to questions, refusing food refusing to recognise her relations

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) dislike to being dressed or cleaned, refusing her food at times, tearing nurses clothes perpetually sighing,

from Nurse Anna England & Husband

Signed, Name, Andrew Scott Nuttle M.D Edinr

Place of Abode, 10 Park Parade, Harrogate

Dated this 30th day of October One Thousand Eight Hundred and Seventy four

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Frederick Bainbridge.

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of the College of Surgeons of London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify, that I on the thirtieth day of October

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) 11 Prospect Place Harrogate

in the County of York separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined Frances Mary Lyon

of (d) 11 Prospect Place Harrogate and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Frances Mary Lyon

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) That on visiting her she rapidly rolled herself to the edge of the bed sitting bolt upright & cried out to be left alone where upon I came away, my hair being short. She jumped & stamped with anger on seeing me & would not be quiet & talked incessantly stopping her ears against the conversation addressed to her yet answering pertinently from time to time saying she does not hear. She also is impudent & talks a pathetic case —

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) from nurse Anna England that she has a tendency to destroy her garments & tear objects & that she refuses food & talks incessantly. Answers things pertinently & is at times excitable & quarrelsome.

Signed, Name, Frederick Bainbridge

Place of Abode, 19 Albert Villas Harrogate

Dated this thirtieth day of October One Thousand Eight Hundred and Seventy four

12142 Hannah Buckley

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Has been subject to Rheumatic Fever and has now valvular disease of the heart.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The first attack was supposed to have been brought on partly by over study and this attack is probably due to the same cause

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 23.

15. What has been the duration of the present attack? About six days from the commencement of the active symptoms.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? The first attack lasted over four months and was much the same as the present attack in character

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? The interval was complete and lasted twelve years

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Great depression of spirits followed by want of sleep

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. Is affected by various objects but the mind often seems to revert to some one subject, but what this is cannot be made out. The patient seems to think she has done something wrong.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? No.

23. What are the habits of the patient as regards personal cleanliness and decorum? Cleanly.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Irregular action of the heart from valvular disease.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect? Small doses of Aconite and Stramonium have been given (according to the Homœopathic method) at first with good effect. Digitalis has been given as an intercurrent remedy. Castor oil to move the bowels.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? The disorder appears to be increasing. There are lucid intervals but they are very short.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Hannah Buckley.

whom I last saw at 3 Tynwald Terrace Charlton Road Manchester

on the 1st day of December. 1874.(*)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

at (*) a person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Hannah Buckley;

Signed, *Name,* Jane Houlding.

Occupation (if any),

Place of Abode, 3. Tynwald Terrace Charlton Rod. Hulme (Manchester)

Degree of Relationship (if any), or other circumstance of connection with the Patient Cousin.

Dated this First Day of December

One Thousand Eight Hundred and Seventy Four

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Hannah Buckley.
Sex and Age	Female. 36. Years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	3 Tynwald Terrace Charlton Road Manchester
Whether First Attack	2nd
Age (if known) on First Attack	23
When and where previously under Care and Treatment	at York. The Friends Retreat.
Duration of existing Attack	about six days.
Supposed Cause	over-Study.
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Jane Houlding. 3. Tynwald Terrace Charlton Road Hulme (Manchester)

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Jane Houlding

Occupation (if any),

Place of Abode, 3 Tynwald Terrace Charlton Road Manchester

Degree of Relationship (if any), or other circumstance of connexion with the Patient Cousin.

MEDICAL CERTIFICATE—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Charles Harrison Blackley, Licentiate

(a). Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine & Member of the Royal College of Surgeons and being in actual practice as a (b) General Practitioner

(b) Physician, surgeon or apothecary, as the case may be.

hereby certify that I, on the Thirtieth day of November at (c) 3 Tynwald Terrace Charlton Road Chorlton (Manchester)

(c) Here insert the street and number of the house, (if any), or other like particulars.

in the County of Lancaster separately from any other Medical Practitioner,

personally examined Hannah Buckley

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) 3 Tynwald Terrace Charlton Road and that

the said Hannah Buckley

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Talkes wildly and incoherently upon a variety of subjects. Wanders from Charlton Road to Charlton Lane Bridge John. Refuses me to attend to her but puts my eyes on her Head. Says my daughter would make a splendid study for the Madonna & the Christ Baby & refers daughter if my eyes were put out. Attempts to throw herself out of the window & would succeed in doing so if not prevented.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her cousin Jane Holding tells me she has attempted to strike her several times. Has torn several of her best clothes. Has broken a saucer by throwing it out of the window while I was attending upon her.

Signed, *Name,* Chas H Blackley

Place of Abode, Ancoats House Hathersage Road Manchester

Dated this Thirtieth day of November One Thousand Eight Hundred and Seventy four

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MEDICAL CERTIFICATE—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Thomas Rayner

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine & Licentiate of the College of Physicians in London &c and being in actual practice as a (b) General Practitioner

(b) Physician, surgeon, or apothecary, as the case may be.

hereby certify, that I on the Thirtieth day of November 1874 at (c) 3 Tynwald Terrace Charlton Road

(c) Here insert the street and number of the house (if any), or other like particulars.

in the County of Lancaster separately from any other Medical Practitioner,

personally examined Hannah Buckley

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) 3 Tynwald Terrace Charlton Road and that

the said Hannah Buckley

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Talks incoherently on most subjects, mixing up facts with the most absurd fictions. Commences a statement respecting some matter & before this is completed rambles off to another & altogether different one. Said she had an elephant brought to the house by a friend the previous night & she does not think was her own hair & she never it was her mothers tears in the form of a whale which was a beautiful idea &c

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) By Miss Jane Holding cousin to Hannah Buckley, who says that she has struck her & tried to throw herself out of the window. Has attempted to destroy herself in several ways & has torn several of her best dresses.

Signed, *Name,* Tho Rayner

Place of Abode, 405 Oldfield Rd Manchester

Dated this Thirtieth day of November One Thousand Eight Hundred and Seventy Four.

1243 G A Ogilvie

NOTICE OF ADMISSION.

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

I hereby give you Notice, That Gordon Albinus Ogilvie

(a) House or hospital.

was admitted into this (a) Hospital as a Private Patient, on the 9th Day of January 1875, and I hereby transmit a Copy of the Order and Medical Certificates on which he was received (b)

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed _____

(c) Medical Superintendent
Friends Retreat

(c) Superintendent or proprietor of——

Dated this 9th Day of January

One Thousand Eight Hundred and ~~Sixty~~ Seventy five

To the Commissioners in Lunacy.

(16 & 17 Vic. c. 96, sched. C., s. 26)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
T. REED.
5, Great Portland Street,
Oxford Street, W.

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ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1. Sects. 4, 8.

I, the undersigned, hereby request you to receive Gordon Albinus Ogilvie

whom I last saw at Lawrence House, York

on the Twenty first day of December 1874 (a)

a (b) person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, *or* an idiot, *or* a person of unsound mind.

Subjoined is a Statement respecting the said Gordon Albinus Ogilvie

Signed, *Name,* Arthur Graeme Ogilvie.

Occupation (if any), Studying Mining Engineering

Place of Abode The Cottage, Cwm Aman Aberdare S. Wales

Degree of Relationship (if any), or other circumstances of connexion with the Patient Brother

Dated this 4th day of January

One Thousand Eight Hundred and ~~Sixty~~ Seventy five

To J. Baker

(c) Superintendent of (d) The Friend Retreat York

(c) Proprietor *or* superintendent of———.
(d) Describing the house *or* hospital by situation and name (if any).

STATEMENT.

If any Particulars in this Statement be not known, the fact to be so stated.

Name of Patient, with Christian name at length	Gordon Albinus Ogilvie
Sex and Age	Male 24 years of age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	B. A. Student of Engineering
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	(4.9.0.) ~~Same~~ Lawrence House, York
Whether First Attack	Yes
Age (if known) on first Attack	24
When and where previously under Care and Treatment	Lawrence House, York since August last
Duration of existing Attack	6 months
Supposed Cause	Excess of Mental Work
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	Not known to be
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Alexander Ogilvie, of Sigewell House, Leiston Suffolk

Signed, *Name,* (e) Arthur Graeme Ogilvie

Occupation (if any), Student of Mining Engineering

Place of Abode, The Cottage, Cwm Aman Aberdare, S. Wales

Degree of Relationship (if any) or other circumstances of connexion with the Patient Brother

(e) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon or apothecary, *ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any) or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Isaac Mengell Williams
being a (a) Member of the Royal College of Surgeons. Eng.
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the ninth day of January 1875
at (c) Lawrence House. Lawrence St. York
in the County of York separately from any other Medical Practitioner,
personally examined Gordon Albinus Ogilvie
of (d) Sizewell House, Leiston, Suffolk, Student of Mining Engineering, and that
the said Gordon Albinus Ogilvie
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion on the following grounds, viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

His morose manner and dejected appearance indicating a condition of melancholia. His refusal to talk and only with difficulty could elicit any answer to questions.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Dr Swanson states that he considers himself the victime of conspiracy, & that he is sent here for a punishment for the immoral life he has led.

Signed Name I. M. Williams

Place of Abode 48 Micklegate. York

Dated this ninth day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon or apothecary, *ex gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) Here insert the street and number of the house (if any) or other like particulars
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind

I, the undersigned, William Bird
being a (a) Member of the Royal College of Surgeons of England and Licentiate of Apothecaries Society
and being in actual practice as a (b) Surgeon and apothecary
hereby certify, that I, on the ninth day of January 1875
at (c) Lawrence House. Lawrence St. York
in the County of York separately from any other Medical Practitioner,
personally examined ~~Sizewell~~ Gordon Albinus Ogilvie
of (d) Sizewell House. Leiston. Suffolk Student of Mining Engineering and that
the said Gordon Albinus Ogilvie
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds, viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f).

General moroseness and melancholic appearance — It was impossible to elicit any answers to questions. but his whole demeanour was so striking that it is impossible to doubt that he is suffering from insanity.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Dr Swanson states that he believes he is here as a punishment. and that there is a conspiracy against him and that he has shewn suicidal tendencies.

Signed Name William Bird

Place of Abode 3 St Leonards Place. York.

Dated this ninth day of January One Thousand Eight Hundred and ~~Sixty~~ Seventy five —

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 21st day of April 1883, of Gordon Albinus Ogilvie a Private Patient in The Friends' Retreat, near York, to Barnwood House, Gloucester.

Given under our hands this 6th day of April in the year of Our Lord One Thousand Eight Hundred and eighty three.

James Wilkes
J. S. Bright
} *Commissioners in Lunacy.*

ORDER.

I,* Arthur Graeme Ogilvie the undersigned, having Authority to discharge Gordon Albinus Ogilvie a Private Patient in The Friends' Retreat, near York, hereby order and direct that the said Gordon Albinus Ogilvie be removed therefrom to Barnwood House, Gloucester.

Given under my hand this* 7th day of April in the year of Our Lord One Thousand Eight Hundred and eighty three.

(Signed) Arthur Graeme Ogilvie

Place of Abode 20 Carlton Hill, St Johns Wood London NW

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

McC. & Co. Ld. 2,000 . 80
16,792

590

William Hall 1244

RETREAT, NEAR YORK.

HEADS OF INQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Patient was born in membership & continues a member

2. Where was the place of birth of the patient? Waverton near Wigton

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing particular to remark, except, perhaps, a strong self-will

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing remarkable — had fair average capacity & intellects

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Had his education at a day school, previous to going, as a boarder, to Friend's School, Wigton, Cumberland — where he finished —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Brought up to husbandry, and was industrious in his employment — a total Abstainer & regular in his conduct

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children, if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? A few years ago, took much interest in natural History — stuffing birds &c &c — since then in raising agricultural seeds —

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No material change — except in reference to the cause of the present malady

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No —

11. Did the patient at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No —

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? In former generations, similar cases have occurd in several instances

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? An intended matrimonial connection —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of readmission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? About 26 years of age

15. What has been the duration of the present attack? About 2 years since he became decidedly worse—

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
Quite regular in health & spirits

19. What were the first decided symptoms of mental aberration? Instability & unaccountable actions in reference to what was the cause of the malady

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested;—is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. as above Affected chiefly in reference to matrimonial connexion, but this had a general weakening tendency on his mental powers & particularly on his memory— Had mental delusions regarding his religious duty about 12 months ago & occasionally since—

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Has been calmer of late, but, a while ago, used threatening language— Never attempted violence— Has a tendency to destroy things in his nasty temper

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Has occasionally refused his meals, but not otherwise

23. What are the habits of the patient as regards personal cleanliness and decorum? Has cleanly habits, though of late, when disturbed in mind, has occasionally been to remind to wash before taking a meal or going to bed, which, formerly, he was very particular to do—

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Strong & healthy

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.
Never been in an asylum or hospital

26. What medical, or other means, have been used for the recovery of the patient, and with what effect? Had medical advice at different times, & the patient has travelled from home occasionally, but no benefit has resulted—

27. Does the disorder appear to be increasing, declining, or stationary? or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? The morbid symptoms have increased & fewer intervals of cheerful demeanor— Changes occur at uncertain intervals, though we have sometimes thought he was worse at the full moon— can scarcely speak decidedly—

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?
Richard Hall— The Father of the patient—

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Hall whom I last saw at Waverton near Wigton - on the 25th day of 1st month 1875 (a) a (b) man of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Hall

Signed, *Name,* Richard Hall
Occupation (if any), Yeoman
Place of Abode, Waverton, Wigton Cumberland
Degree of Relationship (if any), or other circumstances of connexion with the Patient Father of the patient -

Dated this 25 Day of 1st month ~~1875~~

One Thousand Eight Hundred and Seventy five

To Dr. ~~JOHN ARMITAGE.~~ Baker

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	William Hall
Sex and Age	male - 29 3/4 years
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Husbandman
Religious persuasion, as far as known	Member of Society of Friends
Previous Place of Abode	Waverton
Whether First Attack	First attack
Age (if known) on First Attack	About 26 years of age
When and where previously under Care and Treatment	Only under private medical treatment
Duration of existing Attack	Been more decidedly worse for about 2 years
Supposed Cause	A matrimonial connection
Whether subject to Epilepsy	No -
Whether Suicidal	Has used threatening expressions both as re-
Whether Dangerous to others	gards himself & others
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	Examined, as above, by 2 medical men
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Richard Hall

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Richard Hall
Occupation (if any),
Place of Abode, as above
Degree of Relationship (if any), or other circumstance of connexion with the Patient

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Harrison Mitchell

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Doctor of Medicine and Master in Surgery of Edinburgh University

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

hereby certify that I, on the twenty-second day of January 1875

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Mr. Richard Hall's, Wigton, Cumberland

in the County of Cumberland separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined William Hall

of (d) Wigton, Cumberland, Agriculturist, and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said William Hall

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Of heavy, unanimated insane countenance. An aged man in appearance. On entering, when entirely spoken to. From a long conversation with him I found him to be as follows;— almost entirely deprived of power to walk to fact as he was — to follow out his own plans, if any settled ones, by actions — arguing in a quite a good deal. Very alive to others' opinions and hastens and apparently easily led by his angel drives the negative running pleasure and pain. Chiefly other considerations and (g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

By Mr & Mrs Richard Hall — Father & Mother of the patient —

Paranoia & Violent — threatening others and himself. Memory failing have ambulo. Not so cleanly as formerly will take any wish to injure the young lady he ought to have married and go at most unreasonable inconvenient times, &c.

or entirely on marriage he is about going which he has failed to accomplish yet will not relinquish either & will continue marry was prevented in fact — 9c 19c.

Signed, Name, Harrison Mitchell

Place of Abode, Wigton, Cumberland

Dated this 25th day of January One Thousand Eight Hundred and Seventy Five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2. Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Robert Tiffen

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company or as the case may be.

being a (a) Doctor of Medicine, Member of the Royal College of Surgeons of England, Licentiate of the Society of Apothecaries, London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) physician and Surgeon

hereby certify, that I on the twenty fifth day of January 1875,

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Mr. Richard Hall's house at Wigton, near Wigton,

in the county of Cumberland separately from any other Medical Practitioner,

(d) Insert residence and profession, or occupation (if any) of the patient.

personally examined William Hall

of (d) Wigton, agriculturist, and that

(e) Lunatic, or an Idiot, or a person of unsound mind.

the said William Hall

is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) — dull, heavy, somewhat sullen appearance of countenance; — irrational explanation of his conduct in connection with a proposed marriage; general inattention, incapability to reason coherently upon the subject of said marriage; &c. report from ordinary conversation

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Richard Hall, the father of the patient states that for some time past his conduct in reference to the young person he included to marry has been altogether unaccountable as that of a person of unsound mind; that his memory has been generally failing for a considerable time; that he has left his usual employment in agricultural operations for a considerable time; that for an indefinite time leaving no one in charge of them; that the fields and boundaries are sometimes left unattended to; occasionally becomes violent and has threatened to do harm to himself and other members of his family on several occasions.

Signed, Name, Robert Tiffen

Place of Abode, Wigton, Cumberland

Dated this 25th day of January One Thousand Eight Hundred and Seventy five.

No. 1245

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Yes has been a member by conviction for more than 50 years

2. Where was the birth of the patient? Tottenham. Middlesex —

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No —

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Disposition & character kind and affectionate no eccentricity nor precocity

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? No a simple plain education at school at Tottenham —

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. No occupation but habits of industry good

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. About 46 years married 6 children — 5 living eldest who died would have been 44 youngest now living 29.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No except given to much charity beyond his means.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Gradual progressive softening of the brain

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? at about 70 years

15. What has been the duration of the present attack? about 2 years

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? It has been gradually increasing

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

no appreciable

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? No — Health was affected by nasal hemorrhage

19. What were the first decided symptoms of mental aberration?

great loss of memory

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

affected by various subjects delusions

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No —

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Clean & well behaved

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Her health is good

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

None

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

None

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Walter May
Elmley Lodge
Harborne Birmingham

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Ann Beale of Alexandra Villa Alexandra Road Ipswich whom I last saw at Alexandra Villa Alexandra Road Ipswich on the Fifth day of March 1875 (a) a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Mary Ann Beale —

Signed, *Name,* Montagu Beale
Occupation (if any), Commission agent
Place of Abode, 37. Finchley Road London N.W.
Degree of Relationship (if any), or other circumstance of connection with the Patient Son —

Dated this Fifth Day of March
One Thousand Eight Hundred and Seventy Five

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Mary Ann Beale
Sex and Age	Female aged 72 -
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	no occupation has been supported by Children
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	late Hemel Hempstead Hertfordshire. now of Alexandra Villa Alexandra Road Ipswich
Whether First Attack	attacked 2 years since & continuous
Age (if known) on First Attack	
When and where previously under Care and Treatment	no where
Duration of existing Attack	2 years
Supposed Cause	Gradual softening of the Brain
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Montagu Beale 37. Finchley Road London N.W.

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Montagu Beale
Occupation (if any), Commission agent
Place of Abode, 37 Finchley Road London N.W.
Degree of Relationship (if any), or other circumstance of connexion with the Patient Son.

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon *or* apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned Barrington Chevallier
being a (a) Doctor of Medicine of the University of Oxford
and being in actual practice as a (b) Physician
hereby certify that I, on the fifth day of March 1875
at (c) Alexandra Villa, Alexandra Road, Ipswich
in the County of Suffolk separately from any other Medical Practitioner,
personally examined Mary Ann Beale
of (d) Alexandra Villa, Alexandra Road, Ipswich, and that
the said Mary Ann Beale
is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) In the course of a few minutes she ~~[illegible]~~ untied and refastened a small packet containing a pair of gloves ~~[illegible]~~ five times, and each time appeared to expect to find different contents. She spoke of her husband as an old gentleman who had been staying in the house, but not her husband. She also spoke of carriages & horses which have ~~[illegible]~~ no real existence except in her imagination.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* Barrington Chevallier M.D
Place of Abode, The Grove, Ipswich
Dated this fifth day of March One Thousand Eight Hundred and Seventy Five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, *or* apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

I, the undersigned, John Marsh
being a (a) Member of the Royal College of Surgeons of England and Licentiate of the Apothecaries Company London
and being in actual practice as a (b) Surgeon
hereby certify, that I on the second day of March 1875
at (c) Alexandra Villa, Alexandra Road, Ipswich
in the County of Suffolk separately from any other Medical Practitioner,
personally examined Mary Ann Beale
of (d) Alexandra Villa, Alexandra Road, Ipswich and that
the said Mary Ann Beale
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) She told me she had been nursing, washing, and attending to an old man, who lived a few houses off, but she did not know who he was, but they called him Beale — he had gone away and she had not heard from him since (This was her husband, and the nursing "if any" took place at their own house.) A married son who lives in London, she said lived just down the road, that he was not married (this both had been stay?) with her a fortnight before — she kept pointing to an imaginary baby dressed in white, which some one had been holding up in the frost more than two hours, he fa

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Montague Beale — "The son" states that his mother "the patient" told him on thursday last that friends had been making morning calls, each with a splendid carriage, and four horses —

Signed, *Name,* John Marsh
Place of Abode, St. John's Lodge, Woodbridge Rd Ipswich
Dated this fifth day of March One Thousand Eight Hundred and Seventy five

No. 1246

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

no

2. Where was the birth of the patient? Lindley

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

no

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Cheerful Disposition good natural endowments no decided peculiarity but a good mimic

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Yes Careful Religious training at home British School Sunday Scholar & Assistant Teacher

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

very abstemious – Dress making Drapery very industrious, Exemplary in her conduct,

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Spinster

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

no

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

no

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

no

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

General debility

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

Two other mothers sisters had similar symptoms

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The severe Frost which she cannot bear & coming out of a warm room on a severe night

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

595

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

10 days

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

her spirits have varied more lately which we have attributed the very delicate health the intense Cold a fortnight ago

19. What were the first decided symptoms of mental aberration?

Incoherent talk & strange laughing with excited action

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

no special subject

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

refused food but no disposition to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum?

very orderly habits

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

very feeble & Exceedingly sensitive to Cold with languid Circulation

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

under the care of Dr Brewer with no beneficial effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

increasing with lucid intervals

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Thomas Denham or
Joel Denham

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Elizabeth Denham

whom I last saw at Lindley Nr Huddersfield on the 13th day of March 1875 (*)

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind. a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Elizabeth Denham

Signed, *Name,* Thomas Denham

Occupation (if any), Draper

Place of Abode, Mill Field Huddersfield

Degree of Relationship (if any), or other circumstance of connection with the Patient Brother

Dated this 13th Day of March 1875

One Thousand Eight Hundred and Seventy

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Elizabeth Denham
Sex and Age	Female 49
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	Early part of life assisted in a Shop lately Housekeeper Butlers
Religious persuasion, as far as known	a member of the Independent or Congregational Denomination
Previous Place of Abode	Huddersfield
Whether First Attack	12 months ago rather noisy in her movements
Age (if known) on First Attack	48
When and where previously under Care and Treatment	went to Southport for a change of air no medical aid
Duration of existing Attack	seemed to be necessary 10 Days
Supposed Cause	Intense cold & a chill
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Thomas Denham

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Thomas Denham

Occupation (if any), Draper

Place of Abode, Huddersfield

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Thomas Mayer Member of the Royal College of Surgeons in England & Licentiate of the Apothecaries Company London
being a (a) ~~Surgeon & Apothecary~~
and being in actual practice as a (b) Surgeon & Apothecary.
hereby certify that I, on the 12th day of March 1875.
at (c) The Grange Lindley
in the County of York separately from any other Medical Practitioner.
personally examined Elizabeth Denham
of (d) The Grange Lindley Spinster and that
the said Elizabeth Denham
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherent actions & movements. constant & rapid incoherent speech & occasional complete failure to recognise her friends & relations—

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Thomas Denham informs me he has noticed The same facts as above stated.

Signed, *Name,* Thomas Mayer
Place of Abode, Huddersfield
Dated this 12th day of March One Thousand Eight
Hundred and Seventy five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, William Scott
being a (a) Doctor of Medicine ~~Surgeon~~ of the University of Edinburgh & member of the Royal College of Surgeons Edinburgh
and being in actual practice as a (b) Doctor of Medicine
hereby certify, that I on the 10th day of March 1875
at (c) The Grange Lindley
in the County of York separately from any other Medical Practitioner,
personally examined Elizabeth Denham of the Grange
of (d) Lindley Spinster and that
the said Elizabeth Denham
is a (e) person of Unsound Mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Incoherent in her Speech, Constantly & rapidly moving about, Sometimes violent, the reasoning faculty disturbed and not under control

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Thomas Denham informed me he noticed the same symptoms as I have certified to
Her friends also represent her as above stated

Signed, *Name,* Wm Scott M.D.
Place of Abode, 1 Yorkshire Grange Huddersfield
Dated this 13th day of March One Thousand Eight
Hundred and Seventy five.

No. 1247.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Was Member by acceptance

2. Where was the birth of the patient? North Shields

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

Not aware of anything

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

I.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

No. He received a rudimentary education all the age of eleven at a Public School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

Slater & Plasterer Industrious & temperate during always

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Married at the age of 26 age of eldest 25 living, youngest 21 living

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Has had cataract on one eye for the last 17 years the optic nerve in the other gradually decaying Ruptured in left groin for last 4 years

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

No

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

Thro' stealing a piece of wood from a public work which he was engaged at & of which he afterwards informed the foreman —

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

597

14. At what age was the patient first attacked with symptoms of insanity?

52

15. What has been the duration of the present attack?

Two months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

Imagins the Police was wanting him for stealing all manner of things
Fancy one watching him

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Matthew Cromarty Robson
whom I last saw at 91 Stephenson Street North Shields
on the Thirty first day of March 1875 (*)
a (a) Person (b) of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Matthew Cromarty Robson

Signed, *Name,* Mary Robson
Occupation (if any),
Place of Abode, 91 Stephenson Street North Shields.
Degree of Relationship (if any), or other circumstance of connection with the Patient Wife

Dated this Thirty first Day of March
One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Matthew Cromarty Robson
Sex and Age	Male 52 years of age
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Labourer - Slater & Plasterer
Religious persuasion, as far as known	Member of the Society of Friends
Previous Place of Abode	N Shields
Whether First Attack	First
Age (if known) on First Attack	52
When and where previously under Care and Treatment	Nowhere
Duration of existing Attack	Two months
Supposed Cause	Taking a piece of wood from a public work
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Mary Robson 91 Stephenson St N Shields

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Mary Robson
Occupation (if any),
Place of Abode, 91 Stephenson Street North Shields
Degree of Relationship (if any), or other circumstance of connexion with the Patient Wife

5518

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned ~~[illegible]~~ Thomas Joseph Turnbull being a (a) Member of the Royal College of Surgeon, London (Registd 1858) and being in actual practice as a (b) ~~General~~ Practitioner as Surgeon hereby certify that I, on the 27 day of March at (c) 91 Stephenson St. North Shields in the County of Northd. separately from any other Medical Practitioner, personally examined Matthew Cromarty Robson of (d) 91 Stephenson St. North Shields, Slater and that the said Mathew C. Robson is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f): Great depression: absence of collectedness of manner: peculiarity of expression & manner.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Delusion of all kinds related to me by members of the Family: that he had been committing murder: that fancies inanimate objects talk to him &c &c

his wife & son informed me that he was under the impression that he had stolen something: that he was always talking to imaginary persons in his room &c &c

Signed, *Name,* Thomas Joseph Turnbull, 2 Bedford Terrace, North Shields

Place of Abode, M.R.C.S.

Dated this 31 day of March One Thousand Eight Hundred and Seventy 5

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, John Byron Bramwell being a (a) ~~[illegible]~~ of Edinburgh & Member of the Royal College of Surgeons of London and being in actual practice as a (b) General practitioner of Medicine hereby certify, that I on the twenty ninth day of March 1875 at (c) No 91 Stephenson Street North Shields in the County of Northumberland separately from any other Medical Practitioner, personally examined Matthew Cromarty Robson of (d) 91 Stephenson St North Shields, Labourer and that the said Matthew Cromarty Robson is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Because he tells me that his friends are constantly fearing him about having stolen a plank — that they call him Mr Plank — that the walls of his room and the stones in the street are always calling this out — that he sees people about his bed — that a huge viper was crawling on his bed a day or two ago

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) That he is often talking of some murder and that detectives were over from America about it — that he says he had stolen things &c. &c

Information given by his wife and daughter
JBB

Signed, *Name,* JBBramwell MDEdin

Place of Abode, 7 Front St Tynemouth MRCS Lond

Dated this 31st day of March One Thousand Eight Hundred and Seventy five

No. 1248

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

Only Connected through marriage of her Brother

2. Where was the birth of the patient?

Worcester

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was she endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

a strong will, and a good natural understanding.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Education principally with an Aunt

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

No occupation - and habits industrious regular & temperate.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

Unmarried. —

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

None in particular

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

No. —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

Slightly epileptic and hysterical. —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

Usual sickness of Childhood, and a severe inflammatory Cold when about 20 years of age.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

No hereditary - but a sister lost her reason through fright when at School, aged about fourteen —

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

A too frequent attendance of high Church Services — Confession, and the partaking of the Sacrament, the latter acting on the mind as a great and unpardonable Sin Committed, not being in a proper frame of mind.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

599

14. At what age was the patient first attacked with symptoms of insanity?

about forty eight —

15. What has been the duration of the present attack?

two months. —

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

first attack —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

a depression of spirits, noted for the past 18 months or two years. —

19. What were the first decided symptoms of mental aberration?

Utter destruction, from having partaken unworthily of the Communion plate. —

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

a living death. — a skeleton to live one thousand years. — the destruction of the whole world caused by her. —

21. Is the patient prone to acts of destruction or to violence of any kind; or has she made any dangerous attacks upon the life of any person?

Occasionally chumps her head. — but nothing dangerous.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

says she cannot eat, that there is a fire within —

23. What are the habits of the patient as regards personal cleanliness and decorum?

good. —

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

— good. —

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

no. —

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

None, beyond the attendance of a medical man —

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Lucid intervals — rather increasing disorder, the morning and evening being more prone to wander —

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

John Edward Burrow. —
26 Egerton Terrace
Cleveland Street
Birkenhead

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Emma Jane Burrow 26 Egerton Terrace, Cleveland Street. whom I last saw at Birkenhead on the Ninth day of April 1875. (*)

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind.

as a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Emma Jane Burrow.

Signed, Name, John E. Burrow.—

Occupation (if any), Book Keeper Egerton Terrace

Place of Abode, 26 Cleveland Street Birkenhead

Degree of Relationship (if any), or other circumstance of connection with the Patient } Brother.

Dated this 9th April Ninth — Day of April

One Thousand Eight Hundred and Seventy five —

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Emma Jane Burrow—
Sex and Age	female — age forty eight
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	no occupation
Religious persuasion, as far as known	Established Church—
Previous Place of Abode	26 Egerton Terrace Cleveland Street.
Whether First Attack	first attack —
Age (if known) on First Attack	forty eight
When and where previously under Care and Treatment	nowhere —
Duration of existing Attack	two months.
Supposed Cause	Religious excitement
Whether subject to Epilepsy	— No. —
Whether Suicidal	— No. —
Whether Dangerous to others	— No —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	— No —
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none —
Name and Address of Relative to whom Notice of Death to be sent	J. E. Burrow

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (*) John E. Burrow.—

Occupation (if any), Book Keeper

Place of Abode, 26 Egerton Terrace Cleveland Street Birkenhead

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Brother

600

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Doctor in Medicine of Glasgow University

and being in actual practice as a (b) General practitioner

hereby certify that I, on the Ninth day of April 1875

(b) Physician, surgeon or apothecary, *as the case may be*

at (c) 20 Egerton Terrace, Cleveland Street Birkenhead

(c) *Here insert the street and number of the house, (if any), or other like particulars.*

in the County of Chester separately from any other Medical Practitioner,

personally examined Emma Jane Burrow

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) 20 Egerton Terrace, Cleveland Street Birkenhead and that

the said Emma Jane Burrow

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Is Moody - wanders about the house without any object. & sits rocking herself - says that is a monster whose face is made differently from any other thing & whom he cannot destroy - that says she will live for ever - Kicks about without clothes &c

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mrs Burrow her sister in law states that for two years has been prone to Confidential at times states that she has lost Faith to which Epileptic fits she suddenly fell the Whole thing to be a fear of the priest to have an influence & Satan & a punishment the world is to be brought to by Fire & Brimstone has had Epileptic fits -

Signed, *Name,* Hugh Walker

Place of Abode, 11 Hamilton Lyle Birkenhead

Dated this Ninth day of April One Thousand Eight Hundred and Seventy five

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Hugh Miller

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Bachelor of Medicine & master in Surgery of Glasgow University

and being in actual practice as a (b) General Practitioner

(b) Physician, surgeon, or apothecary, *as the case may be.*

hereby certify, that I on the Ninth day of April 1875

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) 20 Egerton Terrace Cleveland Street Birkenhead

in the County of Chester separately from any other Medical Practitioner,

personally examined Emma Jane Burrow

(d) *Insert residence and profession, or occupation (if any) of the patient.*

of (d) 20 Egerton Terrace Cleveland St and that

the said Emma Jane Burrow

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

is a (e) person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Is sullen; Jealous about the House - has got various notions & almost anything mentioned; and Jealousy of herself

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Mrs Burrow her sister says that she considers herself a monster - that she is immortal and cannot die.

Signed, *Name,* Hugh Miller M B

Place of Abode, 11 Hamilton Square Birkenhead

Dated this Ninth day of April One Thousand Eight Hundred and Seventy five

No. 1249

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?
Not in membership, but many of her relatives are Friends.

2. Where was the birth of the patient?
at Bedlesham Sussex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?
Nothing whatever

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
Amiable & docile - with a good understanding and naturally good abilities

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?
Much so. The ordinary long
Her education was conducted chiefly at schools. From
per testimonials from highly
they of the Friends' Schools
satisfactory

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.
For 2 years, she was a Pupil Teacher in a School at Stroudsea
Her habits were in every respect steady & regular

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.
Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?
She early showed a great talent for drawing which she practised with much skill, prevented by illness. She had also a taste for composition and a natural ear for music

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?
About 4 years since or rather more her affections were fixed with some what strong disappointed, which
for life

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?
Not at any time

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?
In early life she suffered frequently from Bronchitis and liability to chest affections, which in later years she appears pretty much to have outgrown

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?
Aunt in a distant county
and many years since

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?
We know of no cause to explain it be the one named above - The attack first showed itself by great nervousness, and apparent pressure on the brain, occasioning a disposition to incessant talking

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

Between the age of
21 & 22

15. What has been the duration of the present attack?

Attacks occur at
longer or shorter intervals

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

She attacks show themselves
by sleepless nights, irritability
and talking

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Perfectly so, when she was with us
and often commenced very rationally

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Unsteady of a very cheerful & happy temperament
mind inspired not excited fear of spirits, evident
evelation by threats

19. What were the first decided symptoms of mental aberration?

The first which appeared was an
apprehension pervading her mind that she should be
lost and an idea that the house was surrounded with
persons who were watching her

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

At the time her mind was completely absorbed
with the individual whom she called by a certain name
but talkedly can cannot speak distinctly

and various persons

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

She has been capricious
work on one or 2 occasions, but nothing
further of any consequence that has been heard of
Great irritability at times

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Not that we have heard of

23. What are the habits of the patient as regards personal cleanliness and decorum?

We have had no cause for complaint
since her illness she has been
usually attended to.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

The general state of her health
has been irregular

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

For the last 9 months she has been
at Dr Parks private Establishment (or Asylum) at Box

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

When at home she was occasion-
ally under Medical care

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder seems rather to have in-
creased during the late retirement Winter, but we
hope not permanently so.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 26th day of April 1875, of Julia Louisa Fry a Private Patient in Kingsdown House, Box to The Retreat, ~~House,~~ York

Given under our hands this 10th day of April in the year of Our Lord One Thousand Eight Hundred and Seventy—five

Robert Nairne
John Heaton
Commissioners in Lunacy.

ORDER.

I,* Julia Fry, the undersigned having Authority to discharge Julia Louisa Fry a Private Patient in Kingsdown ~~House~~, House, Box

hereby order and direct that the said Julia Louisa Fry be removed therefrom to The Retreat, York ~~House~~.

Given under my hand this* 12 day of April in the year of Our Lord One Thousand Eight Hundred and Seventy—five

(Signed) Julia Fry

Place of Abode 2 Clarence Terrace Heath

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
268—(133)

602

605

Kingsdown House Box Wilts 12th April 1875.

I certify that the following is a **NOTICE OF ADMISSION,**

true copy of the Order *To be forwarded to the Commissioners in Lunacy within* one clear day
Statement & Certificates upon which *from the Patient's reception.*
Julia Louisa Fry of 2 Claremont Terrace Bath
was admitted into this Establishment on the
20th day of June 1874. James Gardner M.R.C.P.L. 1st Med. Superintendent.

I hereby give you Notice. That Julia Louisa Fry

(a) House or Hospital.

was admitted into this (*a*) House as a Private Patient, on the
Twentieth Day of June 1874, and I hereby
transmit a Copy of the Order and Medical Certificates on which she was
received (*b*).

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, James Gardner M.R.C.P.L.
(*c*) 1st Med. Superintendent of
Kingsdown House Asylum Box.

(c) Superintendent or proprietor of ———.

Dated this Twentieth Day of June
One Thousand Eight Hundred and Seventy four.

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

603

or other circumstance of connexion with the Patient

605

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Julia Louisa Fry

whom I last saw at 2 Claremont Terrace Bath

on the Seventeenth day of June 1874 (a)

a (b) person of unsound mind as a Patient into your House.

Subjoined is a Statement respecting the said Julia Louisa Fry

(a) Within one month previous to the date of the order.

(b) Lunatic, or an Idiot, or a person of unsound mind.

Signed, Name, Julia Fry

Occupation (if any), Wife of Thomas Rutter Fry

Place of Abode, 2 Claremont Terrace Bath

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Mother (the said Thomas Rutter Fry being totally blind

Dated this Seventeenth Day of June

One Thousand Eight Hundred and Seventy four

To Joseph Nash Esqr MC

(c) Proprietor of the (d) Private Lunatic Asylum Kingsdown House Box Wilts.

(c) Proprietor or superintendent of.

(d) Describing the house or hospital by situation and name, if any.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Julia Louisa Fry
Sex and Age	Female 23 years of age
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Residing with her parents in private life
Religious Persuasion, as far as known	Occasionally attending Baptist Chapel when well
Previous Place of Abode	2 Claremont Terrace Bath
Whether First Attack	First attack
Age (if known) on First Attack	Illness first commencing between the ages of 20 & 21
When and where previously under Care and Treatment	Dr Spender of Bath at her parents
Duration of existing Attack	about one month, attacks at certain intervals not lasting long
Supposed Cause	Chiefly the effect of disappointed love no other cause known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	Mrs Julia Fry 2 Claremont Terrace Bath

(d) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, Name, (d) Julia Fry

Occupation (if any),

Place of Abode, 2 Claremont Terrace Bath

Degree of Relationship (if any) or other circumstances of connexion with the Patient } Mother.

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any), of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

I, the undersigned, John Kent Spender
being a (a) Doctor of Medicine of the University of London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the twelfth Day of June 1874
at (c) 2 Claremont Terrace Bath
in the County of Somerset separately from any other Medical Practitioner
personally examined Julia Louisa Fry
of (d) 2 Claremont Terrace Bath and that
the said Julia Louisa Fry
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) She talks continually and incoherently; appeals to the Deity against imagined evils & wrongs beseeches piteously imaginary persons, and two or three times called me ugly names

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) + She has run out of the house several times half dressed; and once in her night clothes, on one occasion she struck a child; and will give opprobious epithets to passers by

+ Her mother is the informant

Signed, *Name,* John Kent Spender M.D.

Place of abode, 17 Circus Bath

Dated this twelfth Day of June One Thousand Eight Hundred and Seventy four.

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession or occupation (if any), of the patient.*

(e) Lunatic, *or* an idiot, *or* a person of unsound mind.

(f) *Here state the facts.*

I, the undersigned, William Bush
being a (a) Member of the Royal College of Surgeons & a Licentiate of the Apothecaries Company London
and being in actual practice as a (b) Surgeon
hereby certify, that I, on the twelfth Day of June 1874.
at (c) 2 Claremont Terrace Bath
in the County of Somerset separately from any other Medical Practitioner,
personally examined Julia Louisa Fry
of (d) 2 Claremont Terrace Bath and that
the said Julia Louisa Fry
is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) In my first seeing her she wanted to know whether she was going to Hell & whether she was pardoned by God and on leaving her she said you know I was going to hell didn't you

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Her parents stated that for the last 2 or 3 years she has suffered from excitement & depression of spirits, talking incoherently & sometimes using improper language &c.

Signed, *Name,* Wm Bush

Place of Abode 7 Circus Bath

Dated this Thirteenth Day of June One Thousand Eight Hundred and Seventy four.

604

connexion with the Patient

605

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive

whom I last saw at

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the day of (*)

a (b) as a Patient in your House.

Subjoined is a statement respecting the said

Signed, *Name,* _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connection with the Patient _____

Dated this Day of

One Thousand Eight Hundred and Seventy

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length .....

Sex and Age .....

Married, Single, or Widowed .....

Condition of Life, and previous Occupation (if any) .....

Religious persuasion, as far as known .....

Previous Place of Abode .....

Whether First Attack .....

Age (if known) on First Attack.....

When and where previously under Care and Treatment ....

Duration of existing Attack .....

Supposed Cause.....

Whether subject to Epilepsy .....

Whether Suicidal .....

Whether Dangerous to others.....

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent .....

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) _____

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

605

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner.

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name*,

Place of Abode,

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. grs.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon or apothecary, *as the case may be*

(c) *Here insert the street and number of the house, (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name*,

Place of Abode,

Dated this day of One Thousand Eight

Hundred and Seventy

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. grs.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

No 1250

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

No.

2. Where was the birth of the patient?

at Easingwold near York.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

Nothing extraordinary

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

Good intellect

She was a great reader in her youth; but was not more at school than was usual at that period.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. — No occupation in particular. She has always been industrious temperate & regular; at one time she took anodyne for the purpose of allaying physical suffering but was not done so for the last three years.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

She was married at the age of 28. Three children. The eldest would have been 43. The youngest is 36.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

She has suffered once or twice from reverse of circumstances, but some years ago.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

For the last 20 years or more she has suffered from a severe liver complaint.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

~~No reply given~~ Not known.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 37 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

About 60 years of age

15. What has been the duration of the present attack?

Three or four months.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

Several times – From one to three months & in some of the forms stated in the medical certificates

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Complete – From 6 to 10 months.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Nothing particular observable.

19. What were the first decided symptoms of mental aberration?

Religious depression & fear of the future.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

See medical certificates.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No, but see certificates.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Very good.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

She is in general good health, except as we consider her affected by her disorder

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

From time to time medical advice has been taken with some slight relief. but no permanent effect has been produced.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

The disorder appears to be increasing, the attacks are more frequent & larger continued.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Rev. E. Hawkins, Wesleyan Minister
Grimsbury; Banbury, Oxon.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Ann Hawkin
together
whom I last saw at Easingwold, near York
on the fifth day of May 1875 (*)
a (*) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Ann Hawkin

Signed, *Name,* E Hawkin
Occupation (if any), Wesleyan Minister
Place of Abode, Grindbarn, Banbury, Oxon
Degree of Relationship (if any), or other circumstance of connection with the Patient Son of the Patient.

Dated this fifth Day of May
One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Ann Hawkin
Sex and Age	Female age 73
Married, Single, or Widowed	Widowed
Condition of Life, and previous Occupation (if any)	Lives on private Income. Never had any occupation or maintenance
Religious persuasion, as far as known	Wesleyan Methodist.
Previous Place of Abode	Has resided chiefly at Hull, York & Easingwold
Whether First Attack	No.
Age (if known) on First Attack	About 60 years of age.
When and where previously under Care and Treatment	Never before under restrictive care
Duration of existing Attack	Four months
Supposed Cause	Severe liver complaint
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None.
Name and Address of Relative to whom Notice of Death to be sent	Rev. E Hawkin, as above —

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) E Hawkin —
Occupation (if any),
Place of Abode,
Degree of Relationship (if any), or other circumstance of connexion with the Patient

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Edward Buller Hicks MRCS & LKQP. L being a (a) Surgeon and being in actual practice as a (b) Horst hereby certify that I, on the 1st day of May 1875 at (c) Her house. Long Street-Easingwold Yorkshire in the County of York separately from any other Medical Practitioner, personally examined Ann Hawkins of (d) Long Street-Easingwold. Gentlewoman and that the said Ann Hawkins. is a (e) Person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) At my interview Mrs Hawkins stated She was afraid to eat lest she should burst. That her soul was lost That she was in constant fear of Something happening to her, particularly on a Friday, when Something bad always did occur

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr Duffield of Easingwold states to me that she describes herself to them frequently as in agonies & is generally in a most distressed state of mind, without cause for it.

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon or apothecary, as the case may be
(c) Here insert the street and number of the house, (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Edward Buller Hicks MRCS. LKQP
Place of Abode, Market-Place Easingwold

Dated this First day of May One Thousand Eight Hundred and Seventy Five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Wm Teasdale M.R.C.S. Eng: L.S.A. being a (a) Surgeon and being in actual practice as a (b) Horst hereby certify, that I on the First day of May 1875 at (c) Her house, Easingwold, Yorkshire in the County of York separately from any other Medical Practitioner, personally examined Ann Hawkins of (d) Long Street Easingwold, Gentlewoman and that the said Ann Hawkins is a (e) Person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds: viz.—

1. Facts indicating Insanity observed by myself (f) Mrs Hawkins stated to me at my interview with her, that she had sinned unto her day of grace, and her soul was lost—That all the threatenings of the Bible were hers, and yet could find no promise. That she had not one ray of hope and she feared to eat lest she should burst

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mr. Duffield of Easingwold, informs me, that she is almost always in Low Spirits, restless & gloomy, and has made statements that she believes that all things have gone wrong—that God condemns her—

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

Signed, Name, Wm Teasdale M.R.C.S. Eng. L.S.A.
Place of Abode, Easingwold

Dated this First day of May One Thousand Eight Hundred and Seventy Five

No 1251

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No.

2. Where was the birth of the patient? Bigby, Lincolnshire.

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Yes.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?
She was considered strong minded and clever.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She was sent early to school, & received good education.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. She was industrious, temperate & well conducted.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Yes.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No.

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Yes Low Fever 1861

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Not hereditary, but in a few relations.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Cannot say.

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? Forty.

15. What has been the duration of the present attack? Seven weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? Once, three or four months.

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?
Yes for several months together.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
She became gradually low & melancholy for several weeks.

19. What were the first decided symptoms of mental aberration?
Asking different people to destroy her.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Affected by various subjects.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
She occasionally refuses food, & does try to injure herself by strangulation.

23. What are the habits of the patient as regards personal cleanliness and decorum?
She is particularly clean & tidy.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.
Not at present.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. In 1869 in the Asylum at Carlisle, once, about ten weeks; with very good result.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Increasing, very few lucid intervals now, & they are very uncertain.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Matthew Mears jun Cleatham Villa
Kirton in Lindsey

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Georgiana Maw

whom I last saw at Cleatham Villa

on the 17th ~~day~~ day of May 1875 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Georgiana Maw

Signed, *Name,* Matthew Maw Jun

Occupation (if any), Farmer

Place of Abode, Cleatham Villa Kirton in Lindsey (Lincolnshire)

Degree of Relationship (if any), or other circumstance of connection with the Patient Brother

Dated this 17th Day of May

One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Georgiana Maw
Sex and Age	Forty ~~one~~ six
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	—
Religious persuasion, as far as known	Church of England.
Previous Place of Abode	Cleatham Hall.
Whether First Attack	No.
Age (if known) on First Attack	Forty.
When and where previously under Care and Treatment	Wonford House Exeter Asylum - November - December 1869
Duration of existing Attack	Seven weeks.
Supposed Cause	Not known
Whether subject to Epilepsy	No.
Whether Suicidal	Yes.
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Matthew Maw Jun., Cleatham Kirton Lindsey

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Matthew Maw Jun.

Occupation (if any), Farmer

Place of Abode, Cleatham Villa Kirton Lindsey

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Charles Frederick George
being a (a) Member of the Royal College of Surgeons, London, & a Licentiate of the Society of Apothecaries
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the Sixteenth day of May 1875
at (c) Cleatham Villa Kirton in Lindsey. Lincolnshire
in the County of Lincoln separately from any other Medical Practitioner,
personally examined Miss Georgiana Maw
of (d) Cleatham Villa Kirton in Lindsey Lincolnshire and that
the said Georgiana Maw Cleatham Villa Kirton in Lindsey Lincolnshire
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Irrational observations and conversation

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) asking to have her life taken away and wishing to commit suicide, and even making an attempt to do so — I have been told this both by her brother Mr Matthew Maw and by the nurse Ann Clarkson

Signed, *Name,* C. F. George.
Place of Abode, The Grove — Kirton in Lindsey

Dated this 16 day of May One Thousand Eight Hundred and Seventy five.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Luther Emmison
being a (a) Licentiate of the Apothecaries' Society
and being in actual practice as a (b) General Practitioner
hereby certify, that I on the Seventeenth day of May 1875
at (c) Cleatham Villa Kirton in Lindsey Lincolnshire
in the County of Lincoln separately from any other Medical Practitioner,
personally examined Miss Georgiana Maw
of (d) Cleatham Villa Kirton in Lindsey Lincolnshire and that
the said Georgiana Maw
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) extraordinary remarks and absurd ideas — also hallucinations & delusions was exercising an extraordinary control over herself during my examination, partly concealing more marked evidence

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) overwhelming evidence of a suicidal tendency, having even attempted to take her life on two or more occasions — I have been told this both by ~~the nurse~~ her brother Mr Matthew Maw & the nurse Ann Clarkson

Signed, *Name,* Luther Emmison
Place of Abode, Mount House — Scotter

Dated this 17" day of May One Thousand Eight Hundred and Seventy five.

No. 1252.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Eliza Ellis

whom I last saw at Belgrave nr. Leicester

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

on the fifth (a) day of June 1875 (*)

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Eliza Ellis

Signed, *Name,* Charlotte Ellis

Occupation (if any), _____

Place of Abode, Belgrave nr. Leicester

Degree of Relationship (if any), or other circumstance of connection with the Patient } Sister

Dated this 5th Day of June

One Thousand Eight Hundred and Seventy 5

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Eliza Ellis
Sex and Age	Female 49
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Lady
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Belgrave nr. Leicester
Whether First Attack	Third
Age (if known) on First Attack	Thirty
When and where previously under Care and Treatment	Retreat York 1865
Duration of existing Attack	Three weeks
Supposed Cause	Hereditary
Whether subject to Epilepsy	No
Whether Suicidal	Yes
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	No
Name and Address of Relative to whom Notice of Death to be sent	Lucy Ellis, Belgrave nr. Leicester

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Charlotte Ellis

Occupation (if any), _____

Place of Abode, Belgrave nr. Leicester

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Sister

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the fifth day of June 1875 at (c) the Station Hotel York in the County of York separately from any other Medical Practitioner, personally examined Eliza Ellis of (d) Belgrave Place Leicester Spinster and that the said Eliza Ellis is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) First Depression of Spirits a loss of Memory Refuses food & can only be induced to take a little occasionally

2. Other facts (if any) indicating Insanity communicated to me by others (g) Nil

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon or apothecary, as the case may be

(c) Here insert the street and number of the house, (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Signed, *Name,* S. W. North

Place of Abode, York & York

Dated this 5th day of June One Thousand Eight Hundred and Seventy five

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Isaac Mennell Williams being a (a) Member of the Royal College of Surgeons of England and being in actual practice as a (b) Surgeon hereby certify, that I on the fifth day of June 1875 at (c) The Station Hotel, York. in the County of York separately from any other Medical Practitioner, personally examined Eliza Ellis of (d) Belgrave Leicester, Spinster and that the said Eliza Ellis is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) That state of depression of spirits are indicated in her appearance She feels that she has lost all hope for life and that she must be taken care of to ensure her safety.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) Here state the facts.

(g) Here state the information, and from whom.

Signed, *Name,* I. Mennell Williams

Place of Abode, Micklegate York

Dated this fifth day of June One Thousand Eight Hundred and Seventy five

No. 1262

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? She is a birthright member

2. Where was the birth of the patient? Newcastle on Tyne

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? I am not aware of anything She became deaf I believe in consequence of an infantile eruption

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? I am not aware of anything abnormal, beyond some tendency to hysterical crying &c

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? The affections were sufficiently cultivated, but being the youngest child she was somewhat petted & treated rather as a child as she grew up Her education was good, first at Bergton, then at Southport At the latter place she attempted the Cambridge Jr Exam. but failed in one subject.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Her habits were good, & she was very anxious to do right, (with some religious anxiety but not abnormal)

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. She was married at 19½ — her still-born child was born Oct 18th 75 (Married Oct 74)

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? She is very fond of music.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No — The loss of her baby

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No, except fits of hysterical weeping &c Slight paralytic affection of left facial nerve at beginning of present attack

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Severe inflamation of lungs at 13 yrs of age Severe pain in lower part of back two years since, with some menstrual irregularity & accompanied by slight mental depression (not at all amounting to insanity) cause doubtful possibly neuralgic in part.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Father melancholic at one time but never under care or decidedly insane (He died of cancer) Cousin Mrs Corder insane, ~~[illegible]~~ Sister had a short attack of violent manie or delirium, & convulsions after 5th child but recovered in about a week

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Premature confinement of a stillborn child

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity? 20½

15. What has been the duration of the present attack? About 5 wks. Came on gradually a few days after confinement, with at first purely hysterical symptoms

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

First attack

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?
There was no more depression than was natural under the circumstances Sleeplessness & incessant talking were early symptoms. Her health was good up to the time of confinement.

19. What were the first decided symptoms of mental aberration? Incessant talking, irritability & hysterical crying, then violent vituperation against a schoolmistress Mrs L. who had treated her somewhat unkindly many years before

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
By irritability & violent conduct, wh had nearly disappeared for some days previous to the recent outbreak wh began to come on gradually 5 or 6 days since No special (persistent) delusions except dislike to Mrs L.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Is violent & destructive, but not malicious No.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
She has taken her food readily since the first few days of violent mania No inclination to injure herself

23. What are the habits of the patient as regards personal cleanliness and decorum? Habit of spitting since her attack Objects to be dressed sometimes

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Health perfectly good.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No

26. What medical, or other means have been used for the recovery of the patient, and with what effect?
~~Its mutants~~ claret prescribed but she has refused to take it almost from the first has taken some quinine Morphia & Opium in moderate doses produced excitement without sleep. Chloral have 50 gr doses some considerable ~~much~~ excitement & little sleep & she sleeps better & improved otherwise on its discontinuance.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?
Rather increasing at present up to 5 or 6 days since, she seemed improving (with some fluctuation) & for some days had been nearly "herself" except for some childishness.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

H R Proctor
Preston
North Shields

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Emma Lindsay Procter

whom I last saw at Preston North Shields

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind.

on the twenty seventh day of November 1875 (a) a (b) Lunatic as a Patient in your House.

Subjoined is a statement respecting the said Emma Lindsay Procter

Signed, *Name,* Henry R Procter

Occupation (if any), Tanner

Place of Abode, 34 Preston North Shields

Degree of Relationship (if any), or other circumstance of connection with the Patient } Husband of Patient

Dated this twenty ninth Day of November

One Thousand Eight Hundred and Seventy five

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length ..... Emma Lindsay Procter

Sex and Age ..... female ..... twenty ..... years seven months

Married, Single, or Widowed ..... Married .....

Condition of Life, and previous Occupation (if any) ..... married woman

Religious persuasion, as far as known ..... "Friend"

Previous Place of Abode ..... 34 Preston North Shields

Whether First Attack ..... yes.

Age (if known) on First Attack .....

When and where previously under Care and Treatment ....

Duration of existing Attack ..... about five weeks.

Supposed Cause ..... premature confinement

Whether subject to Epilepsy ..... no

Whether Suicidal ..... no

Whether Dangerous to others ..... violent

Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition .....

Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners .....

Name and Address of Relative to whom Notice of Death to be sent ..... H R Procter 34 Preston North Shields

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Henry Richardson Procter

Occupation (if any), _____

Place of Abode, _____

Degree of Relationship (if any), or other circumstance of connexion with the Patient _____

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned William Bourne Ann
being a ~~(a)~~ General Practitioner MD Abd MRCSL &c WB
and being in actual practice as a (b) Surgeon
hereby certify that I, on the twenty ninth day of November
at (c) 34 Preston — North Shields —
in the County of North Umberland separately from any other Medical Practitioner,
personally examined Emma Lindsay Proctor
of (d) 34 Preston North Shields — and that
the said Emma Lindsay Proctor —
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — Maniacal Violence — unwillingness to be properly dressed — destroying & burning what she can get hold of — mental delusions &c

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, William Bourne
Place of Abode, 104 Howard St N Shields
Dated this 29th day of November One Thousand Eight
Hundred and Seventy five —

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Chas Gibson
being a (a) ~~Physician~~ M D University of St Andrews
and being in actual practice as a (b) Physician
hereby certify, that I on the thirty ninth day of November
at (c) Eldon Square Newcastle on Tyne
in the County of Northumberland separately from any other Medical Practitioner,
personally examined Emma Lindsay Proctor
of (d) 34 Preston ~~Proctor~~ North Shields and that
the said Emma Lindsay Proctor
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Fits of violence — destruction of every Delusions — as of one morse being — Mr Lindsay — her former teacher &c

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Great violence — delusions — &c at supra as stated by Mr Proctor & the morses waiting on Mr Proctor

Signed, Name, Chas Gibson M.D.
Place of Abode, Eldon Square Newcastle on Tyne
Dated this 29th day of November One Thousand Eight
Hundred and Seventy five —

No. 1263

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? By descent.

2. Where was the birth of the patient? Hunsinfield

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No-

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing remarkable beyond the love of reading

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Ladies private Schools

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Correct in habits, moral industrious at home. steadily moral.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Unmarried.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No!

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No!

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No!

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Affections of the throat from childhood

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No!

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Unknown

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack? Coming on gradually for several years 3

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Deprived in spirits, loss of sleep

19. What were the first decided symptoms of mental aberration?

Aversion to Society, and out door exercise.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Many peculiarities, mental delusions, loss of memory

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No!

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Occasionally seems to have no appetite
No attempt to injure herself.

23. What are the habits of the patient as regards personal cleanliness and decorum?

Cleanly, but not so neat as formerly

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Not in good health,

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No!

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Attendance of family Doctor

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Gradually increasing, with lucid intervals at uncertain times.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr Oates,
35. New North Road
Shoreditch.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sarah Elizabeth Bates,

whom I last saw at 35. New North Road Huddersfield,

on the Thirty first day of December 1875 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Sarah Elizabeth Bates

Signed, Name, Jane Bates

Occupation (if any), None

Place of Abode, 35. New North Road Huddersfield

Degree of Relationship (if any), or other circumstance of connection with the Patient } Mother

Dated this Thirty first Day of December

One Thousand Eight Hundred and Seventy five.

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sarah Elizabeth Bates
Sex and Age	Female. Thirty eight
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Protestant
Previous Place of Abode	35. New North Road Huddersfield
Whether First Attack	Yes, but been coming on gradually for several years
Age (if known) on First Attack	Unknown
When and where previously under Care and Treatment	Private treatment at home
Duration of existing Attack	Several years
Supposed Cause	Unknown
Whether subject to Epilepsy	No !
Whether Suicidal	No !
Whether Dangerous to others	No !
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mrs Bates 35. New North Road Huddersfield

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, Name, (c) Jane Bates

Occupation (if any), None

Place of Abode, 35. New North Road Huddersfield

Degree of Relationship (if any), or other circumstance of connexion with the Patient } Mother

637

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned John Edwin Foster
being a (a) ~~Surgeon & apothecary~~ M.R.C.S. Eng: & L.S.A. London
and being in actual practice as a (b) Surgeon & apothecary
hereby certify that I, on the 29th day of December
at (c) 35 New North Rd. Huddersfield
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Elizabeth Oates
of (d) 35 New North Rd. Huddersfield and that
the said Sarah Elizabeth Oates
is a (e) person of unsound mind and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Absence of mind. dislike to see strangers & answer questions except in monosyllables. very dejected. vacant appearance. will not look you in the face.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Restlessness especially at night. fear of bodily harm from imaginary persons. irritability of temper. dislike to follow her usual avocation &c. Maria Louisa Oates ~~[illegible]~~ her Sister.

Signed, *Name,* J. E. Foster.

Place of Abode, 45 New North Rd. Huddersfield

Dated this 31st day of December One Thousand Eight Hundred and Seventy 5.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Thomas Brewer
being a (a) Surgeon & apothecary. M.R.C.S. Eng. L.S.A. London
and being in actual practice as a (b) Surgeon & apothecary
hereby certify, that I on the 31st day of December
at 35 New North Road Huddersfield
in the County of York separately from any other Medical Practitioner,
personally examined Sarah Elizabeth Oates
of 35 New North Road Huddersfield and that
the said Sarah ~~[illegible]~~ Elizabeth Oates
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts,*

1. Facts indicating Insanity observed by myself (f) absent look & loss of memory restlessness and a helpless & dejected appearance — appears to be suffering from a constant dread of something.

* (g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g) Is in the habit of leaving her bedroom at nights & sleeping on the landing

* by Jane Oates her mother.

Signed, *Name,* Thomas Brewer

Place of Abode, 6 New North Rd. Huddersfield

Dated this 31st day of December One Thousand Eight Hundred and Seventy five —

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 2nd day of March 1882, of Sarah Elizabeth Oates a Private Patient in The Friends' Retreat, York, to the South Yorkshire Asylum, Wadsley.

Given under our hands this 15th day of February in the year of Our Lord One Thousand Eight Hundred and eighty two.

Charles Palmer Phillips
C. S. Bagot
Commissioners in Lunacy.

ORDER.

I.* Hannah Jane Oates the undersigned, having Authority to discharge Sarah Elizabeth Oates a Private Patient in The Friends' Retreat, York, hereby order and direct that the said Sarah Elizabeth Oates be removed therefrom to the South Yorkshire Asylum, Wadsley.

Given under my hand this* 21 day of February in the year of Our Lord One Thousand Eight Hundred and eighty two.

(Signed) Hannah Jane Oates

Place of Abode New North Road Huddersfield

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

McC. & Co. Ld. 2,000 7, 80
16,79.

638

No. 1264

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? None

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? None

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? No. Educated at a Private School

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Cloth drawer. A hard worker. Temperate up to twenty five years of age since then a constant drinker

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Married at the age of Thirty. Eldest child Twenty youngest Twelve years

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Better circumstances now than when young

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? None

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? His Mother died in the Asylum

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Intemperance

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

53 Years

15. What has been the duration of the present attack?

3 Weeks

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

First Attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

First Attack

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Never slept except under the influence of Alcohol or Sedative Medicine

19. What were the first decided symptoms of mental aberration?

Talking incoherently, Praying, & reading the Bible continually

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

Quarrelled with his Family, Thinks he has made it right with God

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Yes. breaks pots, or anything he can get hold of. took a Knife to-day, and attempted to attack his Wife

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

No No

23. What are the habits of the patient as regards personal cleanliness and decorum?

Good

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

Never been in an Asylum

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Has had Sub-cutaneous Injections of Morphia with Aconite with good effect

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mrs Hall Prince Albert Inn Hunslet Rd Hunslet

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Prince Hall whom I last saw at Prince Albert Inn Hunslet on the 2nd day of January 1876. (a) a (b) Person of Unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Prince Hall

Signed, *Name,* William Henry Mountain.
Occupation (if any), ~~Innkeeper~~ Prince Albert Inn
Place of Abode, Hunslet Rd
Degree of Relationship (if any), or other circumstance of connection with the Patient ~~His Wife~~

Dated this 2nd Day of January
One Thousand Eight Hundred and Seventy six

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	William Prince Hall
Sex and Age	Male 53 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	Publican, Clothdrawer
Religious persuasion, as far as known	Episcopalian
Previous Place of Abode	Hunslet Rd. Hunslet.
Whether First Attack	First
Age (if known) on First Attack	53 years
When and where previously under Care and Treatment	Never
Duration of existing Attack	3 weeks
Supposed Cause	Intemperance
Whether subject to Epilepsy	No
Whether Suicidal	Probable
Whether Dangerous to others	Yes
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	Examined by Two
Name and Address of Relative to whom Notice of Death to be sent	Mrs Hall Prince Albert Inn Hunslet

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Mary Hall
Occupation (if any), Publican
Place of Abode, Hunslet Road
Degree of Relationship (if any), or other circumstance of connexion with the Patient Sister in law

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned Thomas Smith
being a (a) Licentiate of the Royal College of Physicians Edinbro!
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the second day of January
at (c) Hunslet Rd Hunslet
in the County of York separately from any other Medical Practitioner,
personally examined William Prince Hall
of (d) Hunslet Rd Hunslet Publican and that
the said William Prince Hall
is a (e) Lunatic and a proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)
Talking incoherently, Praying incessantly and making it right with his God

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
Breaking articles that he can seize hold off being very violent, stated by his Wife and others,

Signed, *Name,* Thomas Smith
Place of Abode, Leathley Lodge Hunslet Leeds

Dated this 2nd day of January One Thousand Eight Hundred and Seventy Six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, Henry Baillie Hawkins
being a (a) Member of the Royal College of Surgeons of England
and being in actual practice as a (b) General Practitioner
hereby certify, that I on the second day of January
at (c) Hunslet Road Hunslet
in the County of York separately from any other Medical Practitioner,
personally examined William Prince Hall
of (d) Hunslet Road Hunslet Publican and that
the said Wm Prince Hall
is a (e) Lunatic and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) talks incoherently & constantly praying cannot answer questions

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
took a knife to his wife at dinner & broke crockery and anything he could get at, sold him by his wife & daughter

Signed, *Name,* Henry Baillie Hawkins
Place of Abode, Milner House Hunslet

Dated this second day of January One Thousand Eight Hundred and Seventy Six

No 1966

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the birth of the patient? Darlington

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Immaginative

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? Had a good education at a Public Seminary

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Somewhat wilful in his habits & persevering

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Unmarried

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? Anxious about business

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Has recently disposed of his business, and has worried himself greatly about it —

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No —

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Spinal Irritation, Nervousness & has had two attacks of Pleurisy

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? One Brother insane, who died of Cerebral Softening

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? This is the first attack supposed to be caused by over anxiety about business

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity? 52 years

15. What has been the duration of the present attack? 3 months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? —

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration? —

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? Great depression of spirits, temper irritable, insomnia.

19. What were the first decided symptoms of mental aberration? That she had given a false statement concerning her late business.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient. Her constant conversation is of her late business transactions, & fear of consequences. She thinks they are going to impress her

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? No

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way? Threatened to drown herself in the Guiser.

23. What are the habits of the patient as regards personal cleanliness and decorum? Formerly very particular but is now indifferent.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Bodily health - good, but weak

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. Never.

26. What medical, or other means have been used for the recovery of the patient, and with what effect? Change of residence & society - without benefit. Refused Medicine

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods? Increasing Exacerbations occur in the early morning, when she awakes continues till after Midday, in the evening gets comparatively quiet and sensible.

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Miss Tate
Middleton - One. Row
Mr. Darlington.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Mary Tate

whom I last saw at No 4 Middleton one Row

on the 13 day of June 1876 (*)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (*) Patient of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Mary Tate

Signed, *Name,* Margaret Walter

Occupation (if any), None

Place of Abode, No 4 Middleton one Row

Degree of Relationship (if any), or other circumstance of connection with the Patient Sister

Dated this 13th Day of June

One Thousand Eight Hundred and Seventy 6

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Mary Tate
Sex and Age	Female 62
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Formerly grocer
Religious persuasion, as far as known	Wesleyan
Previous Place of Abode	Darlington 14 Blackwellgate
Whether First Attack	yes
Age (if known) on First Attack	62
When and where previously under Care and Treatment	at home
Duration of existing Attack	5 or 6 months
Supposed Cause	over anxiety about business
Whether subject to Epilepsy	no
Whether Suicidal	probably
Whether Dangerous to others	no
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	none
Name and Address of Relative to whom Notice of Death to be sent	Margaret Walter

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) Margaret Walter

Occupation (if any), none.

Place of Abode, 4 Middleton one Row

Degree of Relationship (if any), or other circumstance of connexion with the Patient Sister

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned David Portous Physician & Surgeon Glasgow

being a (a) Doctor of Medicine & Licentiate of the Faculty of Physicians and being in actual practice as a (b) Physician & Surgeon hereby certify that I, on the Eleventh day of January 1876 at (c) Middleton - One - Row in the County of Durham separately from any other Medical Practitioner, personally examined Mary Tate of (d) Middleton - One Row - Grocer and that the said Mary Tate is a (e) Person of Unsound Mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f) She looks thoughtful & downcast, says she is wretched and miserable. Fears Mrs. Reed (to whom she has lately sold her business) thinks she has given him a false account of its value, and that he has sent some one to prosecute her. And that the Police will be round in a few days. That the inhabitants of the village have been put up against her and are continually talking of her conduct in this affair.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Mrs. Walton says she gets frequently very much excited, dreams, knocks her head and this morning put a plank against the walls to get on to the roof of the house, saying she wanted to escape from her troubles.

Signed, Name, David Portous

Place of Abode, Middleton - One - Row

Dated this Eleventh day of January One Thousand Eight Hundred and Seventy six

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon or apothecary, as the case may be.
(c) Here insert the street and number of the house, (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Henry R. Irwin Surgeon Glasgow

being a (a) General Practitioner Licentiate of the Faculty of Physicians Glasgow and being in actual practice as a (b) General practitioner hereby certify, that I on the eighth day of January 1876 at (c) Middleton one Row in the County of Durham separately from any other Medical Practitioner, personally examined Mary Tate of (d) Middleton one Row and that the said Mary Tate is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f) Thinks sick injury may happen Elderly and friends in consequence of having accidentally shocked the man to whom she sold her business. Has given various totally different accounts of how the mistake arose. Believes every one in the village knows of what she is accused. Asks the Post Office Officials examine her letters for evidence against her.

2. Other facts (if any) indicating Insanity communicated to me by others (g) Wife Wallis her niece tells me that during a violent journey tried to throw herself under the train has attempted several times to get out of the window has caught hold of the top of the Railway Room door, hanging heavily on it. Will not retain into the kitchen & covered down in a corner sadly dressed in night gown &c. &c. Thinks every one is against her. Says they were coming to turn her out from home.

Signed, Name, Henry R. Irwin

Place of Abode, Arcadian House Darlington

Dated this 12th day of Jan. One Thousand Eight Hundred and Seventy six

(a) Set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(b) Physician, surgeon, or apothecary, as the case may be.
(c) Here insert the street and number of the house (if any), or other like particulars.
(d) Insert residence and profession, or occupation (if any) of the patient.
(e) Lunatic, or an idiot, or a person of unsound mind.
(f) Here state the facts.
(g) Here state the information, and from whom.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 30th day of May 1876, of Mary Tate a Private Patient in the Friends Retreat, York House, to the North Riding House of York County Lunatic asylum

Given under our hands this 15th day of May in the year of Our Lord One Thousand Eight Hundred and Seventy-six

Robert Nairne
Thos Alston

Commissioners in Lunacy.

ORDER.

I,* Margaret Walter the undersigned having Authority to discharge Mary Tate a Private Patient in the Friend's Retreat, York House,

hereby order and direct that the said Mary Tate be removed therefrom to the North Riding House of York County Lunatic Asylum

Given under my hand this* 16 day of May in the year of Our Lord One Thousand Eight Hundred and Seventy-six

(Signed) Margaret Walter

Place of Abode Middleton one Row

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person who *signed* the order for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband* or *Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person who *made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
208—(133)

No. 1264

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive William Henry Stoneman

whom I last saw at Merton Lodge Torquay,

on the 23rd day of January 1876 (*)

a (b) person of sound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said William Henry Stoneman.

Signed, *Name,* Charles Eagland

Occupation (if any), Companion

Place of Abode, Merton Lodge Torquay

Degree of Relationship (if any), or other circumstance of connection with the Patient Companion

Dated this 23rd Day of January

One Thousand Eight Hundred and Seventy 1876

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	William Henry Stoneman
Sex and Age	Male 44
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Gentleman, Merchant.
Religious persuasion, as far as known	Society of Friends
Previous Place of Abode	Merton Lodge. Torquay
Whether First Attack	Fifth attack
Age (if known) on First Attack	Age 39
When and where previously under Care and Treatment	Friends Retreat 1874
Duration of existing Attack	Three days.
Supposed Cause	Chronic Tendency
Whether subject to Epilepsy	No.
Whether Suicidal	No
Whether Dangerous to others	Yes.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	John Stoneman Combe Copperhouse Croydon

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Charles Eagland

Occupation (if any), Companion

Place of Abode, Merton Lodge Torquay

Degree of Relationship (if any), or other circumstance of connexion with the Patient Companion

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned

being a (a)

and being in actual practice as a (b)

hereby certify that I, on the day of

at (c)

in the County of separately from any other Medical Practitioner.

personally examined

of (d) and that

the said

is a (e) and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house, (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned,

being a (a)

and being in actual practice as a (b)

hereby certify, that I on the day of

at (c)

in the County of separately from any other Medical Practitioner,

personally examined

of (d) and that

the said

is a (e) and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* _____

Place of Abode, _____

Dated this day of One Thousand Eight Hundred and Seventy

(a) I. C. D., a justice of the peace for the county, city, or borough of ——, or in the case of two justices, or of a clergyman and relieving officer or overseer, We, C. D. and E. F.

(b) Physician or surgeon, or apothecary, as the case may be.

(c) Lunatic, or an idiot, or a person of unsound mind.

(d) Add, where the lunatic is sent as being wandering at large, the words wandering at large, and in the case of a lunatic sent by virtue of the authority given to two justices, and not under proper care and control, or and is cruelly treated or neglected by the person having the care or charge of him, as may appear to the justices to be the case.

(e) Where the order directs the lunatic to be received into any asylum other than an asylum of the county or borough in which the parish or place from which the lunatic is sent is situated or into a registered hospital or licensed house, it should state that the justice or justices, or other persons making the order, is or are satisfied that there is no asylum of such county or borough, or that the asylum or asylums thereof is or are full; or (as the case may require) the special circumstances by reason whereof the lunatic cannot conveniently be taken to an asylum for such first-mentioned county or borough.

(f) Asylum, or hospital, or home.

(g) Justices of the peace for the city or borough of ——, or an or the officiating clergyman of the parish of ——. To be signed by two justices where required by the foregoing Act.

(h) The relieving officer of the union or parish of ——, or an overseer of the parish of ——.

(i) Superintendent of the asylum for the County of ——, or the lunatic hospital of ——, or proprietor of the licensed house of ——, describing the asylum, hospital, or house.

ORDER FOR THE RECEPTION OF A ~~PAUPER~~ PATIENT.

Sched. (F.) No. 1.

(a) I — Frederick John Horniman

the undersigned, having called to — Assistance a (b) Surgeon and having personally examined William Henry Horniman ~~a Pauper~~, and being satisfied that the said Wm Hy Horniman is a (c) person of unsound mind (d) —— and a proper person to be taken charge of and detained under Care and Treatment (e) in an Asylum for the Insane hereby direct you to receive the said Wm Hy Horniman as a Patient into your (f) Institution

Subjoined is a Statement respecting the said Wm Hy Horniman

Signed, Name (g) Frederick John Horniman
Surrey House
Forest Hill
~~Name (h)~~ London SE

Dated the Twenty Second Day of January One Thousand Eight Hundred and Seventy Six

To Dr Baker, Medical Superintendent

(i) —— of the Friends Retreat York

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, and Christian Name at length	William Henry Horniman
Sex and Age	Male — 44 years
Married, Single, or Widowed	single
Condition of Life, and previous Occupation (if any)	Gentleman — Merchant
The Religious Persuasion, as far as known	Society of Friends
Previous Place of Abode	Merton Lodge Torquay Devon
Whether first attack	fifth attack
Age (if known) on first Attack	about 38 years
When and where previously under Care and Treatment	in 1874 Retreat, York
Duration of existing Attack	three days
Supposed Cause	Chronic tendancy
Whether subject to Epilepsy	no
Whether Suicidal	no
Whether dangerous to others	yes
Union to which the Lunatic is chargeable	nil
Name and Christian Name, and Place of Abode of nearest known Relative of the Patient, and Degree of Relationship, if known	John Horniman Combe Cliffe House Croydon Father

I certify that, to the best of my knowledge, the above Particulars are correctly stated.

(h) Relieving officer or overseer.

Signed, Name (k) Frederick John Horniman
Surrey House Forest Hill SE

Lunatics 10.
(16 & 17 Vict. c. 97.)
Pauper Patient.

London: Printed by Shaw and Sons, Fetter Lane, London

8—10-73.

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MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *In any case where more than one medical certificate is required by this Act, here insert,* separately from any other medical practitioner.

(e) *Insert residence and profession, or occupation (if any) of the patient.*

(f) Lunatic, *or* an idiot, *or* a person of unsound mind.

(g) *Here state the facts.*

(h) *Here state the information, and from whom.*

I, the undersigned, W. W. Stabb,

being a (a) Surgeon

Member of the Royal College of Surgeons - England

and being in actual practice as a (b) Surgeon hereby certify, that I, on the 22nd day of Jan. 1876

at (c) Merton Lodge Torquay in the County of Devon

(d) separately from any other Medical Practitioner personally examined Wm Henry Horniman Gentleman

of (e) Merton Lodge - Torquay -

and that the said Wm Henry Horniman is a (f) Lunatic and a proper Person to be taken charge of and detained under care and Treatment, and that I have formed this opinion upon the following grounds, viz.:—

1. Facts indicating Insanity observed by myself (g) General Incoherency. Believing People to be in his Bed Room - An impression of strange Voices constantly sounding in his ears - &c - &c.

2. Other Facts (if any) indicating Insanity communicated to me by others (h) the Brother of W. H. Horniman - Great Restlessness - his conduct alarming the Servts threatening his attendant.

Signed, *Name,* W. W. Stabb

Place of Abode, Torquay. Surgeon, &c.

Dated this 22 Day of Jan:-

One Thousand Eight Hundred and Seventy six -

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

I, the undersigned, James Pollard

(a) *Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

being a (a) Surgeon. Member of the Royal College of Surgeons England

(b) Physician, surgeon, *or* apothecary, *as the case may be.*

and being in actual practice as a (b) Surgeon hereby certify, that I, on the 22nd day of January

(c) *Here insert the street and number of the house (if any), or other like particulars.*

at (c) Merton Lodge Torquay in the County of Devon

(d) *In any case where more than one medical certificate is required by this Act, here insert* separately from any other medical practitioner.

separately from any (d) other Medical Practitioner.

personally examined Willm Henry Horniman

(e) *Insert residence and profession, or occupation (if any) of the patient.*

of (e) of Merton Lodge Torquay. Gentleman

and that the said Willm Henry Horniman

(f) Lunatic, *or* an idiot, *or* a person of unsound mind.

is a (f) Lunatic and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(g) *Here state the facts.*

1. Facts indicating Insanity observed by myself (g) 1st When I saw him. he was taking his tea with two Gentlemen. & when seeing me, he became suspicious. & said it was late, & he wished me to call again as he had business with his friends asked for my card. & immediately left the room.

(h) *Here state the information and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (h) Communicated by Wife Benevolent That he has been very restless, wandering about the house. did not sleep well last night. & has frightened the servants in the house.

Signed, Name, James Pollard

Place of Abode, Torquay

Dated this 22nd Day of January One Thousand Eight Hundred and Seventy six.

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1267

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 14th day of October 1880, of William Henry Horniman a Private Patient in The Retreat, York ~~House,~~

to Wonford House, Exeter

Given under our hands this 1st day of October in the year of Our Lord One Thousand Eight Hundred and eighty-

James Wilkes
Robert Nairne
} *Commissioners in Lunacy.*

ORDER.

I,* John Horniman the undersigned, having Authority to discharge William Henry Horniman a Private Patient in The Retreat ~~House,~~ York

hereby order and direct that the said William Henry Horniman be removed therefrom to Wonford House, Exeter

Given under my hand this* 1 day of October in the year of Our Lord One Thousand Eight Hundred and eighty-

(Signed) John Horniman

Place of Abode Coombe Cliff House
Croydon

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father, then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

McC. & Co. L.[illegible] 2,000 7 | 8 [illegible]

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Copy No. 1968

ROYAL LUNATIC HOSPITAL, LIVERPOOL.

NOTICE OF ADMISSION.

To be sent to the Commissioners in Lunacy within one clear day *from the Patient's Reception.*

I hereby give you Notice, That John Fredrick Clarke was admitted into this Hospital as a Private Patient, on the eighth Day of January 1876; and I hereby transmit a Copy of the Order and Statement and Medical Certificates on which he was received (*a*).

(*a*) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, J. Yorke Wood

Medical Superintendent, Royal Lunatic Hospital, Liverpool.

Dated this ninth Day of January One Thousand Eight Hundred and seventy six

To the Commissioners in Lunacy.

Lunatics 11.
(16 & 17 Vict. c. 97, Sch. F.)
(25 & 26 Vict. c. 111.)
Private Patient.

LONDON:
SHAW AND SONS,
Fetter Lane.

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Royal Lunatic Hospital, Liverpool.

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (F) No. 2.

I, the undersigned, hereby request you to receive John Frederick Clarke whom I last saw at 14 Ashton St Liverpool on the eighth day of January 1876 (a) a person of unsound mind, as a Patient into your Hospital.

(a) Within one month previous to the date of the order.

Subjoined is a Statement respecting the said John Fredrick Clarke

Signed, *Name,* Tyndall Bright

Occupation (if any), Merchant

Place of Abode, Woodsto Aigburth Rd Lpool

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Cousin of Wife's

Dated this eighth Day of January One Thousand Eight Hundred and seventy six

To J. Yorke Wood

Medical Superintendent of the Royal Lunatic Hospital, Liverpool.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	John Frederick Clarke
Sex and Age	male. 29
Married, Single, or Widowed	Single
Condition of Life, and previous Occupation (if any)	Clerk in Merchants Office
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Valparaiso
Whether First Attack	Yes
Age (if known) on First Attack	about 24 months
When and where previously under Care and Treatment	Valparaiso
Duration of existing Attack	Six months
Supposed Cause	no idea
Whether subject to Epilepsy	not aware of it.
Whether Suicidal	no
Whether Dangerous to others	no —
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	no
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	no —
Name and Address of Relative to whom Notice of Death to be sent	Tyndall Bright Woodsto Aigburth Rd Lpool

(a) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, *Name,* (a) Tyndall Bright

Occupation (if any),

Place of Abode,

Degree of Relationship (if any) or other circumstances of connexion with the Patient

MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

I, the undersigned, Arthur R Hopper

being a (a) member of the College of Surgeons and Licentiate of Coll. of Physicians, London

and being in actual practice as a (b) Physician & Surgeon

hereby certify, that I, on the eighth Day of January 1876

at (c) On board the Illimania in the Mersey, Lpool

in the County of Lancaster separately from any other Medical Practitioner

personally examined (d) John Frederick Clarke Bookkeeper of Valparaiso- and that

the said John Frederick Clarke

is a person of unsound mind, and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) A. B. of ——. Insert residence and profession, or occupation (if any).

1. Facts indicating Insanity observed by myself (f) He told me that he came out as a Passenger and five minutes afterwards said the most disagreeable part of the voyage was his having to take watch at night, whereas he had done nothing of the kind.

(f) Here state the facts.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Dr Berry the medical Officer onboard the Illimania told me that the patient accepted the attention of a waiter as of a doctor - that he had believed throughout the greater part of the voyage that the vessel he was on board was a man of war & that they had neglected to put the guns on board-

(g) Here state the information, and from whom.

Signed, Name, Arthur R Hopper

Place of abode, 61 Rodney St. Liverpool

Dated this eighth Day of January One Thousand Eight Hundred and Seventy Six

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MEDICAL CERTIFICATE.—Sched. (F.) No. 3.

I, the undersigned, Edward Robert Bickerstetto

being a (a) Fellow of the Royal College of Surgeons of Edinburgh

and being in actual practice as a (b) Surgeon

hereby certify, that I, on the eighth Day of January 1876

(c) on board the Illimania in the River Mersey Liverpool

in the County of Lancaster separately from any other Medical Practitioner

personally examined (d) John Frederick Clarke of Valparaiso - Bookkeeper and that

the said John Frederick Clarke

is a person of unsound mind, and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) A. B. of ——. Insert residence and profession, or occupation (if any).

1. Facts indicating Insanity observed by myself (f)

(f) Here state the facts.

General Incoherence in conversation - Supposes himself to be a Naval Officer in Command of a vessel - Irrational in his views of himself

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(g) Here state the information, and from whom.

Louis Joseph informs me he has been under his charge since leaving Valparaiso - that he has constantly had the illusions I have stated above & been very excited & without cause

Signed, Name, E. R. Bickerstetto

Place of Abode 2 Rodney St. Liverpool

Dated this eighth Day of January One Thousand Eight Hundred and Seventy six.

I certify that this is a correct copy of the order & Med. Certificates of John Frederick Clarke signed - J. Gordon Wood Roy. Lun. Hosp. Med.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the Undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 8th day of February 1876, of John Frederick Clarke a Private Patient in Liverpool Royal ~~House,~~ Lunatic Hospital

to the Friends' ~~House,~~ Retreat, York

Given under our hands this 24th day of January, in the year of Our Lord One Thousand Eight Hundred and Seventy-six

Charles Palmer Phillips
Gwin M. Howard
} *Commissioners in Lunacy.*

ORDER.

I,* Tyndall Bright the undersigned having Authority to discharge John Frederick Clarke a Private Patient in Liverpool ~~House,~~ Royal Lunatic Hospital

hereby order and direct that the said John Frederick Clarke be removed therefrom to the Friends' Ret ~~House,~~ Retreat, York

Given under my hand this* 25 day of January in the year of Our Lord One Thousand Eight Hundred and Seventy-six

(Signed) Tyndall Bright

Place of Abode Woodcote Aigburth R. Liverpool

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission:
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*:
4. If there be no Father then by the Patient's *Mother*:
5. If there be no Father or Mother, then by any *one* of the Patient's *nearest of kin*: Or by the person *who made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(2000 10 | 73—McC. 7764)
208—(133)

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No. 1265 + 1269.

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Not by

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

See Order & Visit & Certificate. 13 Jan. 76.

NOTICE OF ADMISSION,

To be forwarded to the Commissioners in Lunacy within one clear day *from the Patient's reception.*

RECEIVED C.L. 12 JAN 1876

THE RETREAT, NEAR YORK.

I hereby give you Notice, That Fanny Maria Heron

was admitted into this (a) Hospital as a Private Patient, on the 11th Day of January 1876, and I hereby transmit a Copy of the Order and Medical Certificates on which She was received (b).

(a) House or Hospital.

(b) *If a private patient be received upon one certificate only, the special circumstances which have prevented the patient from being examined by two medical practitioners to be here stated, as in the statement accompanying the order for admission.*

Signed, Robert Baker

(c) Medical Superintendent of the Friends Retreat near York

(c) Superintendent or proprietor of ———.

Dated this 11th Day of January

One Thousand Eight Hundred and Seventy six

To the Commissioners in Lunacy.

Lunatics 1.
(16 & 17 Vict. c. 96, sched. C. s. 24.)
(25 & 26 Vict. c. 111.)
Private Patient.
LONDON:
SHAW AND SONS,
Fetter Lane.

653

or other circumstance of connexion with the Patient ———

655

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

Sched. (A) No. 1, Sects. 4, 8.

I, the undersigned, hereby request you to receive Fanny Maria Heron whom I last saw at The Wood Finby Huddersfield on the Ninth day of January (*) a Person of unsound mind as a Patient into your House.

(a) Within one month previous to the date of the order.

(b) Lunatic, or an Idiot, or a person of unsound mind.

Subjoined is a Statement respecting the said

Signed, *Name,* Arthur Heron

Occupation (if any), Bank Cashier

Place of Abode, Savile Town Dewsbury

Degree of Relationship (if any), or other circumstances of connexion with the Patient } Husband

Dated this Tenth Day of January One Thousand Eight Hundred and Seventy six

To Dr Robert Baker

THE RETREAT, NEAR YORK.

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient, with Christian Name at length	Fanny Maria Heron
Sex and Age	Thirty five, 25th July 1840
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	No occupation
Religious Persuasion, as far as known	Church of England
Previous Place of Abode	Savile Town near Dewsbury
Whether First Attack	Yes
Age (if known) on First Attack	About Easter 1875
When and where previously under Care and Treatment	At Home & at her Fathers
Duration of existing Attack	Has been progressive since first appearance
Supposed Cause	Cannot be accounted for
Whether subject to Epilepsy	No
Whether Suicidal	No intimation whatever
Whether Dangerous to others	Not at all
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined, before Admission, separately by Two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	A Heron Savile Town Dewsbury

(c) Where the person signing the statement is not the person who signs the order, the following particulars concerning the person signing the statement are to be added.

Signed, *Name,* (c) Arthur Heron

Occupation (if any), Bank Cashier

Place of Abode, Savile Town Dewsbury

Degree of Relationship (if any) or other circumstances of connexion with the Patient } Husband

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(*) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(*) Physician, surgeon, or apothecary, as the case may be.
(*) Here insert the street and number of the house (if any), or other like particulars.
(*) Insert residence and profession, or occupation (if any), of the patient.
(*) Lunatic, or an idiot, or a person of unsound mind.
(*) Here state the facts.

I, the undersigned, William Robinson
being a (*) Licentiate of the Apothecaries Company and a Member of the Royal College of Surgeons England
and being in actual practice as a (*) Surgeon
hereby certify, that I, on the tenth Day of January 1876
at (*) the house Fixby Huddersfield
in the County of York separately from any other Medical Practitioner
personally examined Fanny Maria Heron
of (*) South Street Savile Town Dewsbury and that
the said Fanny Maria Heron
is a (*) Person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (*) Labours under a delusion that she is lost both in body & mind

(*) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*)
Constantly distressed in mind & moaning

Name of informant must be given -

Signed, Name, William Robinson
Place of abode, Huddersfield
Dated this 10 Day of January One Thousand Eight Hundred and Seventy six

MEDICAL CERTIFICATE.—Sched. (A.) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) Here set forth the qualification entitling the person certifying to practise as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.
(*) Physician, surgeon, or apothecary, as the case may be.
(*) Here insert the street and number of the house (if any), or other like particulars.
(*) Insert residence and profession, or occupation (if any), of the patient.
(*) Lunatic, or an idiot, or a person of unsound mind.
(*) Here state the facts.

I, the undersigned, Charles Clay
being a (*) Licentiate of the Apothecaries Company and a Member of the Royal College of Surgeons England
and being in actual practice as a (*) Surgeon
hereby certify, that I, on the eighth Day of January 1876
at (*) South Street Savile Town Dewsbury
in the County of York separately from any other Medical Practitioner,
personally examined Fanny Maria Heron
of (*) South Street Savile Town Dewsbury and that
the said Fanny Maria Heron
is a (*) Person of unsound Mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (*) Bewailing and incessant idea that she is lost both body and soul
Constant wakefulness and restlessness, refusal of food

(*) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (*)
None - I have myself been in daily attendance

Signed, Name, Charles Clay
Place of Abode Manor House Dewsbury
Dated this 10th Day of January One Thousand Eight Hundred and Seventy six

654

or other circumstance of connexion with the Patient

655

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Fanny Maria Heron whom I last saw at No 1. Belle Vue Terrace Heslington Road York on the Twenty seventh day of January 1876 (a) a (b) person of unsound Mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Fanny Maria Heron

Signed, *Name,* Arthur Heron
Occupation (if any), Bank Cashier
Place of Abode, Savile Town Dewsbury
Degree of Relationship (if any), or other circumstance of connection with the Patient Husband

Dated this Twenty seventh Day of January One Thousand Eight Hundred and Seventy Six

To Dr. ROBERT BAKER,
Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Fanny Maria Heron
Sex and Age	Female Sixty five 25th July 1875
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	no occupation
Religious persuasion, as far as known	Church of England
Previous Place of Abode	Savile Town Dewsbury
Whether First Attack	yes
Age (if known) on First Attack	about Easter 1875
When and where previously under Care and Treatment	at home & at her Fathers
Duration of existing Attack	Has been progressive since first appearance
Supposed Cause	Cannot be accounted for
Whether subject to Epilepsy	no
Whether Suicidal	no intimation whatever
Whether Dangerous to others	not at all
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	A Heron Savile Town Dewsbury

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Arthur Heron
Occupation (if any), Bank Cashier
Place of Abode, Savile Town Dewsbury
Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

655

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons London and being in actual practice as a (b) Surgeon hereby certify that I, on the twenty seventh day of January 1876 at (c) No 1 Belle Vue Terrace Heslington Road York in the County of York separately from any other Medical Practitioner, personally examined Fanny Maria Heron of (d) Savile Town Dewsbury and that the said Fanny Maria Heron is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon or apothecary, as the case may be.

(c) Here insert the street and number of the house, (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an Idiot, or a person of unsound mind.

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) Great Depression of Spirits & Delusion that she is lost both for this world and the next

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, Name, S W North

Place of Abode, Heslington York

Dated this 27th day of January One Thousand Eight Hundred and Seventy six

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MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Charles Clay being a (a) Licentiate of the Apothecaries Company and a Member of the Royal College of Surgeons England and being in actual practice as a (b) Surgeon hereby certify, that I on the twenty seventh day of January 1876 at (c) No 1 Belle Vue Terrace, Heslington Road. York in the County of York separately from any other Medical Practitioner, personally examined Fanny Maria Heron of (d) Savile Town Dewsbury and that the said Fanny Maria Heron is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

(b) Physician, surgeon, or apothecary, as the case may be.

(c) Here insert the street and number of the house (if any), or other like particulars.

(d) Insert residence and profession, or occupation (if any) of the patient.

(e) Lunatic, or an Idiot, or a person of unsound mind.

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f)

Prevailing and incessant idea that she is lost both body and soul

Constant wakefulness and restlessness: refusal of food

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

None – I have myself been in daily attendance.

Signed, Name, Charles Clay

Place of Abode, Manor House. Dewsbury

Dated this twenty seventh day of January One Thousand Eight Hundred and Seventy six

No. 1270

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Connected with the Society - but not in membership

2. Where was the birth of the patient? Worcester or Tewkesbury

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? not aware of anything particular

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? No one living that we know - that can answer these questions

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? It is believed she was at school at Ledcot

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. - Correct in many lived principally during youth with a Grandmother and Aunt

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. married at the age of about 28 - eldest 42 youngest about 30

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? No

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? Suffered from bodily illness and infirmity more or less since birth of youngest child

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? Her eldest sister is now in the Retreat

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration? Imagined that her relations want to poison her -

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.
Has an intensely dislike to those about her - who have to do with her

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? Destroying articles of clothing

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?
Frequently refuses food for a day or two -

23. What are the habits of the patient as regards personal cleanliness and decorum?
When being washed or cleaned - screams murder & such like

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder. Generally debility

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. No -

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mary Ann Bissell
20 Neville Street
Southport

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sophia Bissell

whom I last saw at her house North Lodge Allonby

on the eleventh day of 3 month 1876 (a)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (b) person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Sophia Bissell

Signed, *Name,* John Walker

Occupation (if any), —

Place of Abode, Allonby.

Degree of Relationship (if any), or other circumstance of connection with the Patient none — friend of the family

friend of the family & Clerk of Monthly Meeting of Society of Friends

Dated this 11 Day of 3 mo

One Thousand Eight Hundred and Seventy six

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not Known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sophia Bissell
Sex and Age	72 yrs of age
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	— —
Religious persuasion, as far as known	Professes with Friends
Previous Place of Abode	Sunderland
Whether First Attack	— not known
Age (if known) on First Attack	— not known
When and where previously under Care and Treatment	— " —
Duration of existing Attack	— " —
Supposed Cause	— " —
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	—
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mary Ann Bissell 2 Neville St Southport

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) John Walker

Occupation (if any), —

Place of Abode, —

Degree of Relationship (if any), or other circumstance of connexion with the Patient —

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MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon or apothecary, *as the case may be*
(c) *Here insert the street and number of the house, (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned D Robson Arkshaw
being a (a) M A, M R C S
and being in actual practice as a (b) General Practitioner
hereby certify that I, on the 9th day of March
at (c) North Lodge Allonby
in the County of Cumberland separately from any other Medical Practitioner,
personally examined Sophia Bissell
of (d) North Lodge a person of unsound mind and that
the said Sophia Bissell is an Imbecile Sophia Bissell
is a (e) a Lunatic ~~and a~~ proper person to be taken charge of and detained
under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

+ Sopia Bissell
+ Lunatic or person of unsound mind

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) Mind feeble, Ideas confused vague & wandering. I have considered her her an imbecile for some time back

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Signed, *Name,* D Robson M A, M R C S
Place of Abode, Arkshaw Aspatria

Dated this 9 day of March One Thousand Eight Hundred and Seventy 6

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:*—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*
(b) Physician, surgeon, or apothecary, *as the case may be.*
(c) *Here insert the street and number of the house (if any), or other like particulars.*
(d) *Insert residence and profession, or occupation (if any) of the patient.*
(e) Lunatic, or an idiot, or a person of unsound mind.

I, the undersigned, James Little
being a (a) M B Edin. M R C S Eng.
and being in actual practice as a (b) General Practitioner
hereby certify, that I on the 12th day of March
at (c) North Lodge, Allonby
in the County of Cumberland separately from any other Medical Practitioner,
personally examined Sophia Bissell
of (d) North Lodge, Allonby and that
the said Sophia Bissell
is a (e) person of unsound mind and a proper Person to be taken charge of and detained
under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) +
Her language is vague & incoherent. Is influenced by a bitter animus against her friends

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)
I am as above + her daughter Rebecca Bissell

+ her daughter Mary Ann Bissell

Signed, *Name,* James Little
Place of Abode, Maryport

Dated this 12th day of March One Thousand Eight Hundred and Seventy six

No. 1711

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? Received into the mother (in childhood) into the Society but disowned upon her Second Marriage with one not a member in the year 1847.

2. Where was the birth of the patient? Purleigh in the County of Essex

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? No.

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Kindness of disposition; with a considerable amount of physical and mental energy.

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? She received a good education at the Friends School then established at Islington.

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. No occupation. she assisted her mother in a farm house and married at the age of 20 in the year 1832 — her habits were moral & regular.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. Has been twice married — second marriage at the age of 35 in the year 1847 — issue by first marriage two sons both living ages 15 & 11 — issue by second marriage aged 2 — all the sons are living.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? No.

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? No.

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? Occasional epileptic fits. which came on during sleep — Never fell down with them in the day

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? No.

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? No.

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder? Supposed Cause — Epilepsy

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

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14. At what age was the patient first attacked with symptoms of insanity?

About the age of 40

15. What has been the duration of the present attack?

about two weeks.

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? At intervals more or less frequent, apparently influenced by changes in the weather. Lasting nearly a week, — being suspicious of those around her, refusing food at times, trying to leave the house &c, &c

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

at times her sanity has been greater than at others, but has never been perfectly complete, since her first attack — of late not so complete as formerly.

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

Subject to unusual elevation and depression of spirits — no other remarkable change.

19. What were the first decided symptoms of mental aberration? Suspicion & distrust of her nearest relatives — Incoherent conversation — with various delusions.

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

As answered to Questions 16, 18 & 19 — She says that material objects around her in the house affect her injuriously.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

Has lately resisted, when restraint has been put upon her, but has manifested no violence.

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

Occasionally refuses food for a few days — has not shown any disposition to injure herself.

23. What are the habits of the patient as regards personal cleanliness and decorum? Remarkably clean in her habits, except when under the influence of her attacks, at which times she requires some special attention.

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

Yes.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

No.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

Has been under the care of several medical men, but with no improvement in her condition.

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

Increasing — there are lucid intervals & also exacerbations, which occur at uncertain times

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☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Geo. Hollier

Sudbury, Suffolk

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Emma Hollier

Trinity Chapel House

whom I last saw at Sudbury

on the 26th day of March 1876 (a)

a (b) person of unsound mind as a Patient in your House.

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

Subjoined is a statement respecting the said Emma Hollier

Signed, *Name,* Geo Hollier

Occupation (if any), Congregational Minister

Place of Abode, Sudbury Suffolk

Degree of Relationship (if any), or other circumstance of connection with the Patient Husband

Dated this 26th Day of March

One Thousand Eight Hundred and Seventy Six.

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Emma Hollier
Sex and Age	Female — aged, 64 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	No occupation
Religious persuasion, as far as known	Attends her Husbands Congregational chapel when able
Previous Place of Abode	Purleigh (Essex) — Broomfield (Essex — Thurlow (Suffolk)
Whether First Attack	No.
Age (if known) on First Attack	About 40.
When and where previously under Care and Treatment	Nowhere except at Home.
Duration of existing Attack	About two weeks
Supposed Cause	Epilepsy
Whether subject to Epilepsy	Yes
Whether Suicidal	No
Whether Dangerous to others	No.
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	No.
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	None
Name and Address of Relative to whom Notice of Death to be sent	George Hollier Sudbury Suffolk

(c) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (c) Geo Hollier

Occupation (if any), Congregational Minister

Place of Abode, Sudbury Suffolk

Degree of Relationship (if any), or other circumstance of connexion with the Patient Husband

659

MEDICAL CERTIFICATE.—Sched (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned John Sinclair Holden

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Physician Doctor of Medicine & Licentiate of Royal College Surgeons Edinburgh

(b) Physician, surgeon or apothecary, as the case may be.

and being in actual practice as a (b) Physician & Surgeon

(c) *Here insert the street and number of the house, (if any), or other like particulars.*

hereby certify that I, on the Twenty Sixth day of March

at (c) Trinity Chapel House, Sudbury

in the County of Suffolk separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Emma Hollier

of (d) Trinity Chapel House Sudbury — wife and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Emma Hollier

is a (e) person of unsound mind and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f) — Suspicions of food & medicine, rambling excited manner, fancying that traps are laid for poisoning her.

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Trying to leave the house undressed, opening the window & crying out — refusing food —

Information received from the husband Mr George Hollier

Signed, *Name,* John Sinclair Holden

Place of Abode, Sudbury

Dated this Twenty Sixth day of March One Thousand Eight Hundred and Seventy Six

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MEDICAL CERTIFICATE.—**Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.**

I, the undersigned, William Mein Inman

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Member of Royal College Surgeons England & Licentiate of Apothecaries Society London

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) Surgeon

(c) *Here insert the street and number of the house (if any), or other like particulars.*

hereby certify, that I on the twenty sixth day of March

at (c) Trinity Chapel House Sudbury

in the County of Suffolk separately from any other Medical Practitioner,

(d) *Insert residence and profession, or occupation (if any) of the patient.*

personally examined Emma Hollier

of (d) Trinity Chapel House Sudbury and that

the said Emma Hollier

(e) Lunatic, or an idiot, or a person of unsound mind.

is a (e) Unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

mad person.

(f) *Here state the facts.*

1. Facts indicating Insanity observed by myself (f)

Talking incoherently — I conclude the impression that all things about her are of a noxious character & are undermining her health —

(g) *Here state the information, and from whom.*

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Her husband tells me she is constantly crying & praying sometimes continuously for a week —

Signed, *Name,* Wm Inman

Place of Abode, Sudbury

Dated this Twenty sixth day of March One Thousand Eight Hundred and Seventy Six

No. 1972

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends? No

2. Where was the birth of the patient? Mirfield Yorkshire

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood? Nothing

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable? Nothing extraordinary or remarkable observed about him in his youth –

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries? educated at Wellbrow Moravian School Mirfield –

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period. Cloth Finisher always very industrious temperate & well conducted

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived. He was 20 years 8 months old when married, age of eldest 41 years youngest 27 years

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction? nothing unusual

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success? Sudden death of his first wife –

10. Was the patient ever afflicted with epileptic, paralytic, or other fits? no

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind? nothing that we know of –

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition to the disease supposed to exist, or have any near relatives of the patient ever been insane? none

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

The death of his first wife,

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

660

14. At what age was the patient first attacked with symptoms of insanity? 63 years

15. What has been the duration of the present attack? 3½ Months

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack? first attack

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

Not exactly. he had no regular intervals

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long? first symptoms were sleeplessness –

19. What were the first decided symptoms of mental aberration?

Sleeplessness. anxiety. 1c

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

various subjects, each illusion lasting about 2 or 3 days at times very violents

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person? broken some glass &c not dangerous has not attacked anyone –

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

he has refused food several times, has made no attempt to injure himself.

23. What are the habits of the patient as regards personal cleanliness and decorum? prior to the disorder, clearly & well behaved –

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

No – dyspeptic symptoms for some time for years he has been a bilious subject.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended. never under treatment before –

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

I have attended him for some months. used very brown brandy

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

increasing gradually & I am expecting softening of the brain

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

Mr. Wildsmith Eshott Cottage Morfield

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Joseph Wildsmith whom I last saw at Mirfield on the 28th day of March 1876 (*)

(a) Within one month previous to the date of the order. (b) Lunatic, or an idiot, or a person of unsound mind.

a (b) Lunatic or Person of unsound mind as a Patient in your House.

Subjoined is a statement respecting the said Joseph Wildsmith

Signed, *Name,* William Dendas

Occupation (if any), Locomotive Supt.

Place of Abode, Park Hill, Wakefield

Degree of Relationship (if any), or other circumstance of connection with the Patient Son in Law

Dated this 29th Day of March 1876

One Thousand Eight Hundred and Seventy

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Joseph Wildsmith
Sex and Age	Male 63 years
Married, Single, or Widowed	Married
Condition of Life, and previous Occupation (if any)	retired Cloth Finisher
Religious persuasion, as far as known	Baptist
Previous Place of Abode	8 Holt Cottage Mirfield
Whether First Attack	first attack
Age (if known) on First Attack	63 years
When and where previously under Care and Treatment	at Home
Duration of existing Attack	3½ Months
Supposed Cause	Not known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	not dangerous
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mr Wildsmith 8 Holt Cottage Mirfield

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) W. Dendas

Occupation (if any), Loco. Supt.

Place of Abode, Park Hill Wakefield

Degree of Relationship (if any), or other circumstance of connexion with the Patient Son in Law

661

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Thomas Dobson Doctor of Medicine Surgeon & Apothecary of the Apothecaries Co. London

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a)

(b) Physician, surgeon or apothecary, as the case may be

and being in actual practice as a (b) Surgeon & Apothecary

(c) Here insert the street and number of the house, (if any), or other like particulars

hereby certify that I on the 30th day of March 1876

at (c) Green Cottage, Holbeck, Leeds

in the County of York separately from any other Medical Practitioner,

personally examined Joseph Wilkinson

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Eshott Cottage, Moorfield, Gentleman and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Joseph Wilkinson

is a (e) Lunatic and a proper person to be taken charge of and detained

under Care and Treatment, and that I formed this opinion upon the following grounds: viz.:—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) He is in constant fear of some horrible accident to happen to himself or his property. He is going to jump into the fire.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g) He will frequently attempt to wander about. Refuses himself of all necessary comforts to wear. Is unable or almost afraid to go out. He wants to get free to his Children. Information given me by his male attendant John Jackson

Signed, Name, Thomas Dobson

Place of Abode, Green Cottage Holbeck Leeds

Dated this 30th day of March One Thousand Eight Hundred and Seventy 6

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Geo. Briggs Pierson

(a) Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary, ex. gra.:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, or as the case may be.

being a (a) Surgeon, Apothecary & Member of the Royal College of Surgeons England and Licentiate of the Apothecaries Society

(b) Physician, surgeon, or apothecary, as the case may be.

and being in actual practice as a (b) General Medical practitioner

hereby certify, that I on the 30th day of March 1876

(c) Here insert the street and number of the house (if any), or other like particulars.

at (c) Green Cottage, Holbeck, Leeds

in the County of York separately from any other Medical Practitioner,

personally examined Joseph Wilkinson

(d) Insert residence and profession, or occupation (if any) of the patient.

of (d) Eshott Cottage, Moorfield Joseph Wilkinson and that

(e) Lunatic, or an idiot, or a person of unsound mind.

the said Eshott Cottage, Moorfield Joseph Wilkinson

is a (e) Lunatic and a proper Person to be taken charge of and detained

under Care and Treatment, and that I have formed this opinion upon the following grounds: viz.—

(f) Here state the facts.

1. Facts indicating Insanity observed by myself (f) He under the delusion that he is in danger of going to the workhouse. That he has great contracts on hand & owes heavy wages & cannot meet them. Cannot give any reason for his poverty. Does not think that he has lost any money, but thinks that he is involved in the Embezzlement of Messrs Says he cannot tell the Christian names of said parties. Seems bewildered.

(g) Here state the information, and from whom.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

Facts stated as above by attendant, John Jackson.

Signed, Name, Geo. Briggs Pierson

Place of Abode, Holbeck. Leeds.

Dated this 30th day of March One Thousand Eight Hundred and Seventy Six.

TRANSFER OF PRIVATE PATIENT.

16 & 17 Vict., Cap. 96, § 20.

CONSENT.

We, the undersigned, Commissioners in Lunacy, hereby consent to the removal, on or before the 13th day of January 1877, of Joseph Wildsmith a Private Patient in the Friend's Retreat, ~~House~~, York

to the County Lunatic Asylum, Clifton, York

Given under our hands this 29th day of December in the year of Our Lord One Thousand Eight Hundred and Seventy-six

John D. Cleaton
James Wilkes
Commissioners in Lunacy.

ORDER.

I,* William Dundas the undersigned, having Authority to discharge Joseph Wildsmith a Private Patient in the Friend's Retreat, ~~House~~, York

hereby order and direct that the said Joseph Wildsmith be removed therefrom to the County Lunatic Asylum, Clifton, York

Given under my hand this* 30th day of December 1876 in the year of Our Lord One Thousand Eight Hundred and Seventy six

(Signed) William Dundas

Place of Abode Park Hills
Wakefield

* Note. This order must be signed and dated *subsequently* to the consent of the Commissioners; and it must be signed by

Generally
1. The person *who signed the order* for the Patient's admission;
2. If such person be incapable (by reason of insanity, or absence from England, or otherwise), or if he be dead, then by the *Husband or Wife* of the patient.
3. If there be no Husband or Wife, then by the Patient's *Father*;
4. If there be no Father, then by the Patient's *Mother*;
5. If there be no Father or Mother, then by any one of the Patient's *nearest of kin*: Or by the person who *made the last payment* on the Patient's account.

In cases of Chancery Patients—The Committee of the Person.

(McC. & Co. 2,000 5|76)
6331

662

No. 1273

RETREAT, NEAR YORK.

HEADS OF ENQUIRY.

Requested to be filled up by the Friends and Medical Attendant of the Patient.

PERSONAL CIRCUMSTANCES AND HISTORY PRIOR TO MENTAL DISORDER.*

1. Is the patient in membership, by birthright or otherwise, or is he (or she) in any way connected with the Society of Friends?

2. Where was the birth of the patient?

3. Was there anything peculiar in the mental or physical circumstances of the patient during infancy or childhood?

4. What appeared to be the disposition and character during the youth of the patient; were these marked by any remarkable strength or vigour, or by any eccentricity, or decided peculiarity; was he endowed with a greater or less share of natural understanding than is common; or was anything like precocity of intellect observable?

5. Were the understanding and the affections much cultivated in very early life; what extent and description of literary instruction did the patient receive, and was this given at home, or if not, in what description of schools or other seminaries?

6. To what occupation was the patient brought up; and what were his (or her) habits, as regards industry, temperance, and regular conduct, during youth, as well as at a more advanced period.

7. If the patient be married, state at what age his (or her) marriage took place; also the number of children if any, and the age which the eldest and youngest would have attained, supposing them to have survived.

8. Has the patient, at any time, engaged in any intellectual, or other pursuit, with particular earnestness; or has his conduct ever exhibited a strong bias in any direction?

9. Has any material change taken place in the pecuniary circumstances of the patient; or has he been exposed to any particular reverse or disappointment of any other kind, or to any remarkable success?

10. Was the patient ever afflicted with epileptic, paralytic, or other fits?

11. Did the patient, at any period of life, previous to the origin of the present malady, suffer from any particular bodily illness or infirmity; and if so, of what kind?

HISTORY OF THE MENTAL DISORDER.

12. Is any hereditary predisposition tothe disease supposed to exist, or have any near relatives of the patient ever been insane?

13. What are supposed to be the causes (remote and immediate) of the first attack, and what those of the subsequent and last attacks of mental disorder?

* When answers have previously been furnished to the eleven queries under this head, they may, in case of the re-admission of a patient, be passed over; and answers need only be given to such queries, from 12 to 27 inclusive, as apply to the history of the existing attack of the disorder, and to the present condition of the patient.

14. At what age was the patient first attacked with symptoms of insanity?

15. What has been the duration of the present attack?

16. If this be not the first attack, how often has the malady previously occurred; of what duration, and in what forms, at each attack?

17. Were the intervals of sanity between the previous attacks, if any, complete; and what was their duration?

18. Previous to any decided appearance of insanity, was there any unusual elevation or depression of spirits, or was any remarkable change in the temper, opinions, or conduct observed; or was the sleep, or the health of the patient, in any other respect, materially affected, and if so, in what way, and for how long?

19. What were the first decided symptoms of mental aberration?

20. Since the patient has appeared decidedly insane, in what way has the disorder been peculiarly manifested? is the mind of the patient affected indifferently by various subjects, or chiefly by one, and if so, what is that subject? Mention particularly any remarkable or permanent delusions which may affect the patient.

21. Is the patient prone to acts of destruction or to violence of any kind; or has he made any dangerous attacks upon the life of any person?

22. Has the patient shown any disposition to refuse food, or to injure himself, and if so, in what way?

23. What are the habits of the patient as regards personal cleanliness and decorum?

24. Is the patient in good bodily health? If not, describe the symptoms which have been observed, and the present state of the disorder.

25. If the patient has ever been under care in any public or private asylum or hospital, state when, how often, how long, and with what result such treatment was attended.

26. What medical, or other means have been used for the recovery of the patient, and with what effect?

27. Does the disorder appear to be increasing, declining, or stationary; or are there any lucid intervals; or any great remissions or exacerbations, and if so, do such changes occur at uncertain times, or at stated periods?

☞ Who is to be responsible for the quarterly accounts, and to whom are they to be sent?

ORDER FOR THE RECEPTION OF A PRIVATE PATIENT.

As required by (16 & 17 Vict. c. 96, & 25 26 Vict. c. 111.)

The Act of Parliament requires that the person signing the Order for the Reception shall have seen the patient within a month, and the Medical men signing the Certificates within a week, and both the Order and the Medical Certificates shall be signed not more than seven days previous to the admission of the patient; that the two medical practitioners who sign the latter shall not be in partnership with each other; that they shall be distinct from and unconnected with, (as Father, Brother, Son or Partner,) the person who signs the order for the reception of the patient; and in like manner, unconnected with the Medical Superintendent and Visiting Medical Officers of the Retreat. When Special circumstances prevent the patient's being examined by two medical practitioners before admission, he will be received upon one medical certificate; but in that case two fresh certificates must be obtained within three days of his reception.

I, the undersigned, hereby request you to receive Sophia Bissell York Terrace Heslington Road York

whom I last saw at 1 Belleview on the 1st day of April 1876 (*)

(a) Within one month previous to the date of the order.
(b) Lunatic, or an idiot, or a person of unsound mind.

a (*) Person of unsound Mind as a Patient in your House.

Subjoined is a statement respecting the said Sophia Bissell

Signed, *Name,* William Briggs

Occupation (if any), Retired Grocer

Place of Abode, Mayes Villa Fulford York

Degree of Relationship (if any), or other circumstance of connection with the Patient Brother in Law

Dated this 1st Day of April

One Thousand Eight Hundred and Seventy Six

To Dr. ROBERT BAKER,

Superintendent of the Friends' Retreat..

STATEMENT.

If any Particulars in this Statement be not known, the Fact to be so stated.

Name of Patient with Christian Name at length	Sophia Bissell
Sex and Age	Female – 72 Years –
Married, Single, or Widowed	Widow
Condition of Life, and previous Occupation (if any)	Husband was a Grocers assistant.
Religious persuasion, as far as known	Professes with Friends –
Previous Place of Abode	Sunderland
Whether First Attack	Not Known
Age (if known) on First Attack	Not Known
When and where previously under Care and Treatment	At Home
Duration of existing Attack	Not known
Supposed Cause	Not Known
Whether subject to Epilepsy	No
Whether Suicidal	No
Whether Dangerous to others	No
Whether found Lunatic by Inquisition, and Date of Commission or Order for Inquisition	
Special Circumstances (if any) preventing the Patient being examined before Admission, separately by two Medical Practitioners	
Name and Address of Relative to whom Notice of Death to be sent	Mary Ann Bissell Neville Street Southport

(*) Where the person signing the statement is not the person who signs the order the following particulars concerning the person signing the Statement are to be added.

Signed, *Name,* (*) William Briggs

Occupation (if any), Retired Grocer

Place of Abode, Mayes Villa Fulford York

Degree of Relationship (if any), or other circumstance of connexion with the Patient Brother in Law

664

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned Samuel William North being a (a) Member of the Royal College of Surgeons Eng and being in actual practice as a (b) Surgeon hereby certify that I, on the first day of April 1876 at (c) 1 Bellevue Terrace York in the County of York separately from any other Medical Practitioner, personally examined Sophia Bissell Widow of (d) Alms House Allerby and that the said Sophia Bissell is a (e) Lunatic and a proper person to be taken charge of and detained under Care and Treatment, and that I formed this opinion upon the following grounds; viz.:—

1. Facts indicating Insanity observed by myself (f)
Rambling incoherent conversation & general belief that she is persecuted

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house, (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* S W North

Place of Abode, Castlegate York

Dated this 1 day of April One Thousand Eight Hundred and Seventy six

MEDICAL CERTIFICATE.—Sched. (A) No. 2, Sects. 4, 5, 8, 10, 11, 12, 13.

I, the undersigned, Isaac Wemmell Williams being a (a) Member of the Royal College of Surgeons, England and being in actual practice as a (b) Surgeon hereby certify, that I on the first day of April 1876 at (c) 1 Bellevue Terrace York, in the County of York separately from any other Medical Practitioner, personally examined Sophia Bissell Widow of (d) The Alms House, Allerby and that the said Sophia Bissell is a (e) person of unsound mind and a proper Person to be taken charge of and detained under Care and Treatment, and that I have formed this opinion upon the following grounds; viz.—

1. Facts indicating Insanity observed by myself (f)
Her language is vague and incoherent and she has a strong feeling against her nearest relatives.

2. Other facts (if any) indicating Insanity communicated to me by others (g)

(a) *Set forth the qualification entitling the person certifying to practice as a physician, surgeon, or apothecary ex. gra.*:—Fellow of the Royal College of Physicians in London, Licentiate of the Apothecaries' Company, *or as the case may be.*

(b) Physician, surgeon, or apothecary, *as the case may be.*

(c) *Here insert the street and number of the house (if any), or other like particulars.*

(d) *Insert residence and profession, or occupation (if any) of the patient.*

(e) Lunatic, or an idiot, or a person of unsound mind.

(f) *Here state the facts.*

(g) *Here state the information, and from whom.*

Signed, *Name,* I. W. Williams

Place of Abode, Micklegate York

Dated this 1st day of April One Thousand Eight Hundred and Seventy six