

**Fourteenth annual report of the medical superintendent / Provincial Hospital for the Insane, Halifax, Nova Scotia.**

**Contributors**

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PROVINCIAL  
HOSPITAL FOR THE INSANE,

HALIFAX, NOVA SCOTIA.

*Fourteenth Annual Report of the Medical Superintendent.*



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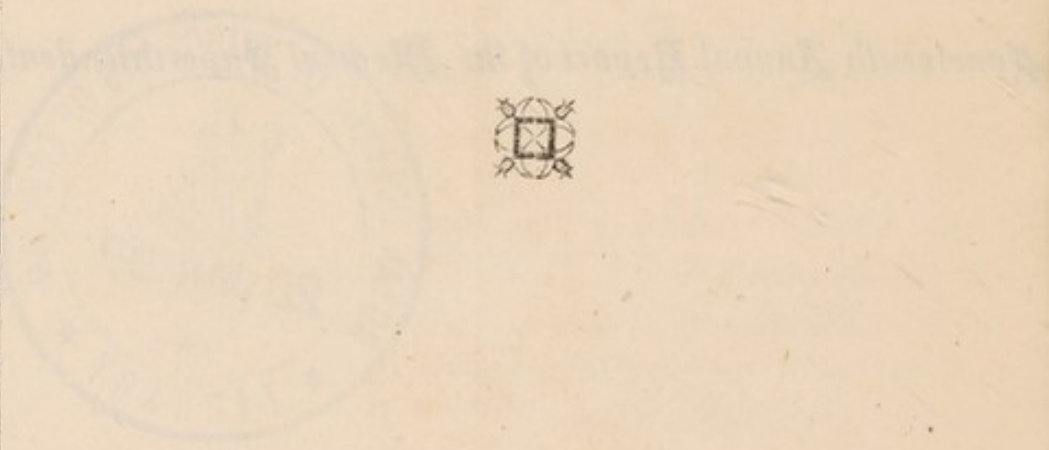
HALIFAX, N. S.

1872.

PROVINCIAL

HOSPITAL FOR THE DEAF

HALL, NO. 100, SOUTH



PRINTED BY ORDER OF THE BOARD OF SUPERVISORS

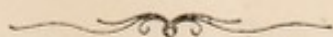


HALL, NO. 100, SOUTH

1871

PROVINCIAL  
HOSPITAL FOR THE INSANE,  
HALIFAX, NOVA SCOTIA.

1871.



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MR. R. D. DICKSON.



PROVINCIAL

HOSPITAL FOR THE INSANE

HALIFAX, NOVA SCOTIA

1871

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ROBERT W. McREAGHY, M. D.

Surgeon and Apothecary  
MR. THOMAS McCLIBBON

Physician  
MR. GEORGE DOWNE

Surgeon  
MR. R. B. DICKSON

Surgeon  
MR. GEORGE DOWNE  
MR. JOHN B. McNEIL

Physician  
MR. R. B. DICKSON

REPORT OF THE HOSPITAL FOR THE INSANE  
ON THE ADJUSTMENTS  
MADE AT THE HOSPITAL FOR THE INSANE  
DURING THE YEAR  
NUMBER RESIDENT OR STAYING A HALF PER CENT (8.58)  
WHEN REFERRED ON THE  
DURING THE PREVIOUS YEAR: THE HOSPITAL HAS BEEN

**ANNUAL REPORT**  
OF THE  
**MEDICAL SUPERINTENDENT**

FOR THE YEAR

1871.

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TO THE HONORABLE THE COMMISSIONER OF  
PUBLIC WORKS AND MINES:

*Sir,*—

I have the honor to submit the Fourteenth Annual Report of the Hospital for the Insane.

The admissions in 1871 have been sixty-six (66) in number; thirty-four (34) males, and thirty-two (32) females. The entire number under care this year has been three hundred and twenty-six (326).

Seventy-four (74) have been discharged, forty-six (46) males, and twenty-eight (28) females, leaving two hundred and fifty-two (252) on our record at the end of the year. The daily average for 1871 has been two hundred and sixty (260).

The recoveries for the year have been forty-one (41) being at the rate of sixty-two per cent (62.12)



on the admissions. Twenty-eight (28) have died, making the mortality rate for this year ten and three quarters per cent (10.76) on the average number resident, or eight and a half per cent (8.58) *when reckoned on the whole number under care.*

During the thirteen years the Hospital has been in operation, seven hundred and sixty-one (761) have been admitted, and five hundred and nine (509) discharged, as follows: namely one hundred and thirty-eight (138) have died, twenty (20) have been removed unimproved, sixty (60) have been sent home more or less relieved, and two hundred and ninety-one (291) have been discharged as recovered. These have been arranged in a summary, showing the relative proportion of males and females, at the foot of table II. in the appendix.

The admissions in 1871 were necessarily restricted, many applications having been declined, either from want of accommodation, or from the unsuitable character of the cases applied for, such as idiots, epileptics, and cases of delirium tremens. Had the reception of all been imperative, the Hospital would have been overcrowded, even to a more injurious extent than formerly, and its usefulness thereby greatly impaired.

The discharges for the year include a greater number of deaths than usual, twenty (20) males, and eight (8) females, chiefly of aged and infirm patients, after a prolonged Hospital residence.

The recoveries have been forty-one; (41), twenty three (23) males and eighteen (18) females, being at a higher ratio than in any previous year, and greatly above the average.



These results of treatment are carefully recorded from year to year, and are clearly exhibited in the tables appended, embracing the statistics of the Hospital for the whole period since its opening.

After an absence more or less prolonged, fourteen (14) patients have been re-admitted during the year, the greater number coming back willingly, and some even urging to be brought once more to the Hospital.

Two are absent "on probation"—a mode of discharge which enables us to send patients home at an earlier period than we would otherwise feel safe in recommending. It tests the recovery of all, so that very few are now discharged otherwise than as restored.

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### OCCURRENCES OF THE YEAR.

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The steady daily routine of Hospital life would be most monotonous and tiresome, both to patients and those engaged in their care, were it not that kind-hearted friends favor the household from time to time with enlivening entertainments, and pleasant excursions, and in many other ways evince an unfailing interest in their welfare. These will be alluded to more at length under the head of Acknowledgments.

During the past year the Hospital has been honored by visits from His Honor the Lieutenant Governor, accompanied by Governor Howland of Ontario, and His Excellency the Naval Comman-



der-in-Chief. General Doyle very considerably entered the following minute in the Visitor's Book :

" August 14, 1871.—I have much pleasure in stating that on inspecting the Asylum to-day I found everything as usual, in perfect order, and I approve most highly of the kind way in which the inmates are treated by Dr. DeWolf and his assistant Dr. Robert McKeagney.

HASTINGS DOYLE,  
Lt. General and Lt. Governor."

In addition to the numerous visits of inspection with which you have kindly favored us as Commissioner of Public Works, the Honorables the Provincial Secretary, the Attorney General, the Commissioner of Crown Lands, and other members of the Government and of both branches of the Legislature, have visited the Hospital at different periods.

The Committee of Assembly on Humane Institution paid their customary visit during the session of the Legislature, but much to our regret were precluded by other engagements from devoting as much time as usual to inspection. Individual members of the Committee, however, availed themselves of other opportunities to notice the every day working of the Hospital, and kindly gave expression to their entire satisfaction with our various arrangements, and with the general management of the institution.

After commenting upon their visit to the Poors' Asylum, their report for 1871 goes on to state :—  
" They have also visited the Lunatic Asylum at Mount Hope, and found the institution, as far as they could judge from the short and imperfect examination permitted them, in very proper and



effective operation. The patients seemed unusually happy and contented under the mild and rational discipline introduced and practised by the Medical Superintendent, Dr. DeWolf, and his Assistant, Dr. McKeagney. The musical entertainments, which have lately been frequently repeated before the assembled inmates, seem to have had a very salutary influence. Some members of the Committee had the pleasure of being present at one of these concerts, and could not but admire the orderly behaviour and evident enjoyment of the audience."

The Board of Commissioners, besides their regular quarterly meetings have paid visits of inspection at uncertain intervals, weekly and oftener, recording the result in their minute book on each visitation. In their last Quarterly report the following entry is made: "The Commissioners are  
"glad to state that the condition of the Hospital  
"at present in all its departments, is highly satisfactory, reflecting much credit on the management, and with much pleasure recommend it to  
"the confidence of the public, and the continued  
"generous support of the government."

The institution has also been visited by His Lordship the Bishop of Nova Scotia, His Grace the Archbishop of Halifax, and by strangers and friends of patients to the number of forty every week, showing an amount of public inspection fully sufficient to detect any serious want of good management.

The visits of the patients' friends, when not manifestly injurious, are always encouraged; and



the most ample opportunity is afforded to all to satisfy themselves as to the actual condition of the Hospital, and its various appliances.

In the autumn two months leave of absence was granted to the Storekeeper Mr. Downie, who while in England, visited several of the leading British Asylums, and had an opportunity of comparing our system of distributing supplies and of keeping accounts with theirs, and thus gained an amount of practical knowledge easily applicable to our purposes.

A change has recently been made in the mode of keeping the Hospital accounts, insuring greater accuracy and a more ready examination. This involved the appointment of a Bursar or Accountant, and Mr. Thomas McCulloch, a thoroughly efficient officer, has commenced his duties at the Hospital, attending daily for this purpose.

A series of printed forms is being prepared similar to those used in the English Asylums, and at London, Ontario, and when these are completed and in use, the business affairs of the institution will be exhibited in a clearer light, and the whole routine more thoroughly systematized than heretofore.

#### CONCERTS AND THEATRICALS.

Early in the year the young men of St. Vincent's Hall Dramatic Class favored us with an enlivening theatrical entertainment, and M. G. Black, Esq. and friends gave two very pleasing concerts, attended by members of the Legislature and other visitors. During the summer the Philharmonic



Society favored the inmates of the Hospital with a concert and dance which gave great gratification. Later in the season three literary and musical entertainments were kindly afforded by Halifax and Dartmouth friends—first by brother Victorian and the Band of Belle-Air College, the second by Rev. Dr. Warren of St. Paul's, Dr. Trenaman, W. Hill, Esq., and others, and the last by J. G. Smith, Esq., Miss Deuchmin and friends. All these were sources of great enjoyment to the employees and their families as well as the attendants, and were highly beneficial to the patients. The last concert was given by kind friends named above, with the aid of Mr. McEleney, Band-master of the 78th Highlanders, whose cornet solos were rapturously encored. We had also a most enjoyable evening entertainment by the Rose-bud Band of Hope, as in former years.

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#### EXCURSION.

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Through the kind liberality of the Halifax and Dartmouth Steamboat Company, a large number of the patients, attendants, domestics, and other employees, and their families, together with official and other visitors, including the pupils from the Institution for the Deaf and Dumb, had a delightful excursion in the steamer "Mic-Mac," passing around George's Island, thence to Point Pleasant, up the North-West Arm, (studded with lovely villas) and thence toward the Eastern Passage.



From this the circuit of the harbor was made, passing H. M. S. "Royal Alfred," and through the Narrows to Bedford Basin. The Harpists gave excellent music, and fruit and refreshments were liberally served.

Although over one hundred patients were on board the steamer, and some for the first time, nothing occurred to mar the day's pleasure. Everything passed off most happily, and on landing hearty cheers were given for Captain McKenzie and the Company.

#### OTHER ENTERTAINMENTS.

Hallow 'een was duly observed in the customary manner, our Engineer Mr. Dickson kindly aiding us with music as on former occasions. The String Band of the 78th Highlanders afforded us most excellent music for another evening's entertainment.

His Honor Judge Stevens of New Brunswick favored the household with recitations and an address, on another occasion. Twice the patients were privileged to go abroad for Entertainments. A number went to Dartmouth to listen to an instructive and interesting lecture by Rev. H. L. Owen, illustrative of his Historical Chart; and a still larger number crossed the harbour in boats, and witnessed the performance at the Empire City Circus, the kind manager Mr. Durand having considerately furnished them with free tickets.



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**REPAIRS.**

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Extensive repairs have been called for by the ravages of the destructive gale of October 12th. Fences were demolished, boats destroyed, the wharf greatly injured, and the Hospital roof damaged to the extent of from two to three thousand slates. These injuries were promptly made good.

The Steam pipe used in heating the portion of the Hospital first built, having become defective after twelve years use, was replaced by new pipe and new hangings, allowing for expansion and contraction, and put in thorough working order by contract. The air chambers were properly floored with brick at the same time

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**NON-RESTRAINT.**

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As "Total Abstinence" is considered by the advocates of the Temperance cause to be the only safe-guard against the evils of intemperance, and moderate drinking is looked upon as a dangerous custom; so in the management of the Insane the total disuse of mechanical restraint is the best security against tyrannical and revolting treatment.

Dr. Connolly's able and effectual advocacy of the principle of non-restraint, has not only led to its being adopted in every County Asylum in



England, with rare exceptions, but has influenced the Superintendents of German Asylums to follow, in part at least, so good an example. From one who has recently visited, for the third time, the British and Continental Asylums, we learn that "it is evident that in the Countries of Germanic language there has been a very material diminution since 1849 in the use of the restraints in question."\*

In the late Sir James Clarke's valuable and interesting memoir of his friend Dr. Conolly, we find enumerated as advocates of the non-restraint system in Continental Europe, Dr. Morel of Rouen, the late distinguished Dr. Griesenger of Berlin, Dr. Meyer of Gottingen, Dr. Augusto Tebaldi of Italy, and Dr. Salomon of Malmo, Sweden, and last but not least, Baron Mundy.

In this same memoir we find several Colonial Asylums mentioned where the non-restraint system is followed. Of the Asylum at Jamaica Sir James reports "mechanical restraint is not employed, and seclusion is kept within moderate limits." At Auckland, New Zealand, "restraint was not used, seclusion but little resorted to." At Ceylon, "the treatment is conducted on the non-restraint system."

For years past we have here discarded the use of every kind of restraining apparatus, and cases requiring to be secluded are of rare occurrence.

The new Asylum at London, Ontario, is free from every kind of mechanical restraint and (as is the case also with this Hospital) shower baths are

\* Dr. Pliny Earle. Report of Northampton (Mass) Hospital for Insane, October, 1871.



unknown, Dr. Landor states that the tendency in some reports to sneer at non-restraint has made it incumbent on him "to defend a system he heartily approves and constantly practises with the best results."

A marked tribute to the excellence of the non-restraint system is given in the report elsewhere quoted, whose author has had the best opportunities of forming a correct judgment, although singularly unaware of the prevalence of this system beyond the boundaries of the British Islands. He states as follows: "Judging from a point of view from which are embraced not only organization, architectural construction and general adaptation to their purpose but systematic operation, neatness, and all those conveniences of life which contribute to what in the English Language is called 'comfort,' the British Hospitals, as a whole, are undoubtedly superior to those of any other country."

This marked superiority is chiefly attributed to a more experienced and better disciplined corps of attendants, and herein lies the practicability of the non-restraint system. A strict and watchful supervision, with thorough training, will ensure a superior staff of attendants (proper selection having been made in the first instance) and these will find their own comfort as well as that of their patients greatly enhanced by the avoidance of everything calculated to cause annoyance or irritation.

We have a sad instance recently of the utter uselessness of restraint when applied to prevent acts of violence, in an occurrence which resulted fatally in one of the Eastern Asylums in November last. One of the patients manifested acts of



violence on two or three occasions by striking a person with his fist, and on one occasion with a pail. In consequence of these acts his hands were manacled in such a manner that it was thought he could not inflict injury on any one; but it was a mistake. He obtained possession of a heavy weapon similar to a long-handled scrubbing brush, and by a swinging motion of his body (although his hands were fastened to a leathern belt) he struck one of his associates a blow on the head, which resulted in death two days afterwards.

I have said restraint in this case was useless; it was worse than useless, it deceived the attendant, leading him to suppose no violence need be dreaded because the man was restrained; whereas no amount of restraint that any one would pronounce justifiable could prevent serious injury if this homicidal patient were resolutely bent upon carrying out his design. If he had the use of his feet he could inflict severe injury that way, while there are other modes by which he could do serious if not fatal harm. His being irritated by restraint would render him a more dangerous patient while under this indignity, than he would be while having the free use of his limbs. Watchfulness, and the presence of superior numbers, are more to be relied upon, than any form of restraining apparatus.

The trustees report in reference to this case that "such measures have been adopted as we trust will prevent its recurrence in the future." It would be very interesting to know precisely what these measures are, and to note the results.



## ONTARIO ASYLUMS.

The Superintendents of American and Canadian Hospitals for Insane, while in session in June, were invited to inspect the Toronto Asylum, which has deservedly acquired a wide reputation for the excellence of its management, under the experienced and skilful superintendence of Doctor Workman. They were also conveyed to the handsome Asylum recently opened at London, of which Dr. Landor is the worthy Superintendent. The excellent modern arrangements and appliances of this institution, proved that every care had been taken in preparing the plans, and in carrying them out. The spacious and convenient dining halls for each story; the well-arranged day rooms and recessed corridors; the spacious and airy central hall for recreation; the ample store-rooms, and the excellent heating, cooking, and laundry arrangements, all bear evidence of professional forethought and matured design. The Hospital is well supplied with excellent furniture, the oak benches and tapestry sofas being especially noticeable. The bedsteads are of the very best description for Asylum use. They are all of maple or cherry, polished, mortised together without screw or nail, the closely fitting joints well glued, and the bottom slats also mortised and glued in. The bedding is excellent, and yet not expensive.

The site on which the Hospital stands contained originally two hundred acres, but this being con-



sidered insufficient for five hundred patients, one hundred acres additional were subsequently purchased immediately adjoining. The people of Ontario have good reason to be proud of their noble institutions for the Insane.

The Rockwood Asylum at Kingston, of which Dr. J. R. Dickson is the able Superintendent, is situated in Ontario, but is not strictly a Provincial Institution, being under the direction and control of the Dominion Government. It was formerly used chiefly as an Asylum for Insane of the criminal class, but has been greatly enlarged, and is now occupied by ordinary patients, the great majority of whom are chargeable to the Province. The transfer of this Asylum to Ontario having been sanctioned by the General and Local Legislatures, is now under negotiation.

It is a question whether all the Hospitals for Insane in British America should not be under the Supervision and scrutiny of a General Board of experienced and competent Inspectors.

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#### ACKNOWLEDGEMENTS.

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No part of a Superintendent's annual report gives him a tithe of the pleasure that is derived from the acknowledgement of kind hearted generosity manifested year after year by liberal benefactors who sympathize with the sorrows of the insane.

Foremost in this rank we have to own our indebtedness to the ministers of the Gospel. Week after week, from the opening of the Hospital, Clergymen of different denominations have gratuitously officiated.



ated here in rotation, with such undeviating regularity, that a Sunday afternoon rarely passes without our household being privileged to attend Divine Service.

For very acceptable presents to individual patients, besides those from their immediate relatives, thanks are due to His Honor Lieut. General Doyle, and to Commissioner Ross, and also to Mrs. Wallace, Mrs. Duffus, Mrs. Noble, Mrs. Sinclair, Mrs. Moren, Mrs. Ferns, Miss Pryor, Dr. Jas. Stewart Forston Asylum, Dorset, England, and Mr. Ellis, H. M. S. "Royal Alfred."

The entertainments of the year have already been adverted to, and for these we are deeply indebted to the continued kindness of thoughtful and benevolent friends, whose hearts could not fail to have been gladdened by witnessing the joy they diffused through our household on the several occasions alluded to.

We owe especial acknowledgements to Mrs. Hill, Mrs. Uniacke, and Mrs. Gordon, to Miss Deuchmin, Miss Alexander and Miss McIntosh, to M. G. Black and J. G. Smith, Esqs., as also to Rev. R. Warren, M. D., Brother Victorian, Judge Stevens, Dr. Trenaman, G. G. Gray, W. Ackhurst, and H. McD. Henry, Esqs., and to Mr. Crawford, Mr. Bliss, Mr. Thos. Hagarty, Mr. John R. Wilson, Mr. Mitchell and Mr. McEleney, who on different occasions contributed largely to the enjoyment and welfare of the patients.

To the Directors of the Halifax Steamboat Company, and their obliging Agent, Captain McKenzie, our best thanks are due for the use of the steamer



"Mic-Mac," for the excursion already spoken of.

The Hon'ble the Provincial Secretary kindly presented the Hospital with a mounted map of the County of Kings; Miss Bliss and Miss Willis sent a large box of Artificial Flowers; Mrs. Mantagu has continued to furnish Illustrated Australian papers; Z. S. Hall, Esq., has favored us with a number of Periodicals, Magazines, &c., &c. George Troop, Esq., continues his donation of Illustrated London News and Punch, fortnightly, and to the British North American Tract Society we are indebted for a donation of Illustrated Periodicals and Pamphlets.

To the Chairman of Commissioners, Geo. G. Dustan, Esq., several of the patients are under obligations for carriage and sleigh drives.

Mrs. H. Y. Mott and family generously continue their annual donation of Fruit and Cake in abundance for our Hallow 'Een and Christmas gatherings.

John M. Watson, Esq., kindly forwarded a large supply of Raisins, Grapes, Figs and Almonds, recently, which were an unusual treat to many.

Our renewed thanks are due to the Press. We are under obligations for a continuance of the following papers, namely:

- The "Abstainer."
- " "Acadian Recorder," (daily.)
- " "British Colonist."
- " "Christian Messenger."
- " "Church Chronicle."



- The "Colonial Standard," (Pictou.)  
" "Eastern Chronicle," (New Glasgow.)  
" "Evening Express,"  
" "Halifax Citizen."  
" "Halifax Evening Reporter," (daily.)  
" "Liverpool, N. S. Advertiser."  
" "Morning Chronicle."  
" "Monaghan's Advertiser."  
" "Presbyterian Witness."  
" "Windsor Mail," (Hants Co.)

To these have been added the "Illustrated Christian Weekly" of New York, through kindness of an unknown friend, and occasional numbers of Quebec, Montreal, and St. John, N. B., papers, as also of the "Scotsman" of Edinburgh.

The proprietors of all the above-named, will please accept our sincere acknowledgments. No kind of reading is so eagerly sought for as the newspapers of the day, and without these our inmates would indeed be shut off from the outside world.

I have to express heartfelt gratitude for your own kindness, and that of the Government, in granting leave of absence to attend the Annual Meeting of the American Association of Superintendents of Hospitals for Insane, held at Toronto, Ont., in June, as also for your countenance and support at all times in the management of the Hospital.

I have pleasure in acknowledging the cordial and efficient aid of Dr. McKeagney, Assistant Physician, as well in the treatment and care of the patients, as in the general management of the affairs of the institution. I am indebted also for



his assistance in preparing the numerous tables appended to this Report.

For devotion to duty, and hearty co-operation in carrying out the humane system of non-restraint, thanks are also due to the subordinate officers and to the attendants.

In closing our list of acknowledgments, we would not omit to return sincere thanks to J. W. Langmuir, Esq., Inspector of Asylums, Toronto, for indefatigable and assiduous attention to all the members of the Specialty at their meeting in June.

To the Honorable the Commissioner of Public Works (Ontario), and to Kivas Tully, Esq., Architect and Engineer, thanks are due for their kindness in forwarding plans and drawings in connection with the extension of the Hospital.

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#### REQUIREMENTS.

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The requisite accommodation for patients so urgently asked for in former reports, is about to be provided at an early date by the completion of the Hospital, the government having very considerably advertised for tenders in the autumn, thus enabling the contractors to provide much of the required material during the winter, and thereby forwarding the construction of the building, while lessening its cost.



The completion of the Hospital necessitates the early acquisition of land for a road, since the building when finished will extend so completely across the present premises, as to leave no space for an entrance road to the front. On the southern side there is at present a space of less than five feet in width, between the building and the boundary line; while on the northern side about the same distance will be left, when that wing is built.

The present entrance road will not only be completely covered by the new building, but it will be liable to be closed at once when the contracts are taken, as it occupies the space required by the contractors for storing their heavy materials. Hence, not only is a new entrance road an absolute necessity, but an immediate and pressing want.

As to the course of this new road, it may not be amiss to point out the desirability of having it so located as to shorten the distance, and to make the immediate approach in front, rather than in rear of, the main structure. By pursuing a northerly course from the western front for about an eighth of a mile, a slight turn to the east would bring the new road into the present highway, and would very materially lessen the distance—the course being so much direct. It would also bring every one in front of the Hospital on their approach, instead of passing close to one end and somewhat in the rear, as would be the case if a slight deviation only were made from the present entrance road.

Besides the necessity for a new road, there is a strong and growing objection to the present high-



way where it passes the Hospital. The heavy autumn gale of 1871 prostrated many of our shade trees, and in this way exposed the farm buildings, and the rear grounds of the Hospital to the gaze of inquisitive and inconsiderate travellers. The female patients cannot take their customary morning and afternoon walk without being stared at and sometimes accosted by those passing the grounds at this point.

The highway leads over a hill, from the top of which a full survey is had of the back windows of the Hospital. By removing this thoroughfare about an hundred and fifty yards to the eastward, almost wholly on ground now belonging to the Hospital, the hill will be avoided, and the travelling public kept at a more suitable distance than at present; while the same hill will then intercept their objectionable oversight of the patients' walks.

Not only is land required for an entrance road, as already stated, but additional land is greatly needed for farming purposes. The present grounds extend a mile or more in rear of the Hospital, but are less than three hundred yards in width, consequently the portion available for farm work is very much restricted. This work affords the best employment for insane patients, and a large number of those now under care might be steadily thus engaged, with benefit to themselves and advantage to the institution, if moderately extensive fields could be acquired, easy of access and within view of the Hospital.

Among other requirements may be named an



airing court for the male patients, a store-room for supplies, and a small steam-boiler for summer use.

Extensive repairs are needed in the portions of the Hospital first built—the walls require to be furred out, lathed, and plastered, and many of the windows will have to be refitted, and properly hung and secured.

Additional aids to ventilation are desirable, and apparently easily attainable. The large Emerson's ventilators already inserted have proved of signal service, and it is proposed to provide additional outlets leading to these, to secure a more thorough ventilation of the men's wards.

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### CONCLUSION.

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Another year of Hospital life has passed, and the results are such as to afford encouragement for future effort, and continued perseverance. We have been providentially spared any serious casualty, and the even tenor of daily routine has been interfered with to a less degree than might reasonably have been anticipated with so large a household.

Cheering visits from recovered patients are among our greatest pleasures, and letters of sincere gratitude continue to reach us, even from remote distances.



Devoutly thankful for past blessings, and hopeful as to the future, we enter cheerfully upon the duties of the coming year.

JAMES R. DEWOLF, M. D., EDIN.,

*Medical Superintendent.*



LIST OF TABLES, ETC.

MEMORANDUM OF ASSOCIATION TABLES

Table 1. The Admissions, Discharges, Deaths, and Deaths for the year 1871.

" 2. The Admissions, Discharges, Deaths, and Deaths for the opening of Hospital.

" 3. Mean Annual Mortality and Proportion of the sexes.

" 4. History of Annual Admissions.

" 5. Causes of Death.

" 6. Length of Residence.

" 7. Duration of Disease of Admissions.

" 8. Ages.

" 9. Civil Condition.

" 10. Medical Cases.



OTHER TABLES

11. Monthly Admissions and Discharges.

12. Alleged Accidents.

13. Civil Condition.

14. Former Residence.

15. Former Occupation.

16. Re-admissions.

17. County, Provincial, and Private Patients.

18. Cost of Provisions.

19. Expenditure for Labor.

20. Garden Produce.

21. Articles made by Patients.

Reports received.  
 Admissions and Discharges of Patients.  
 Queries to be answered.  
 Form of Certificate.  
 Rules for Attendance.



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## LIST OF TABLES, ETC.

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### MEDICO-PSYCHOLOGICAL ASSOCIATION TABLES.

- Table 1. The Admissions, Re-admissions, Discharges, and Deaths for the year 1871.
- " 2. The Admissions, Re-admissions, Discharges, and Deaths from opening of Hospital.
- " 3. Mean Annual Mortality and Proportion of Recoveries.
- " 4. History of Annual Admissions.
- " 5. Causes of Death.
- " 6. Length of Residence.
- " 7. Duration of Disorder on Admissions.
- " 8. Ages.
- " 9. Civil Condition.
- " 10. Assigned Causes of Insanity.

### OTHER TABLES.

- " 11. Monthly Admissions and Discharges.
- " 12. Alleged Ages, etc.
- " 13. Civil Condition.
- " 14. Former Residence.
- " 15. Former Occupation.
- " 16. Re-admissions.
- " 17. County, Provincial, and Private Patients.
- " 18. Cost of Provisions.
- " 19. Expenditure for Labor.
- " 20. Garden Produce.
- " 21. Articles made by Patients.

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Reports Received.  
 Admission and Discharge of Patients.  
 Querries to be answered.  
 Form of Certificate.  
 Rules for Attendants.





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STATISTICAL TABLES.

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LIST OF TABLES, ETC.

NEUROPSYCHIATRIC STATISTICS TABLES

1. The Madhouses, Re-admissions, Discharges, and Deaths for the year 1871.
2. The Asylums, Re-admissions, Discharges, and Deaths for the year of Hospital.
3. Mean Annual Mortality and Proportion of Recoveries.
4. History of Annual Admissions.
5. Causes of Death.
6. Death of Paupers.
7. Proportion of the Insane.
8. Age.



GENERAL TABLES

11. Monthly Admissions and Discharges.
12. Alleged Ages, &c.
13. Civil Condition.
14. Former Residence.
15. Former Occupation.
16. Religions.
17. County, Fraternal, and Private Patients.
18. Cost of Treatment.
19. Expeditious for Labor.
20. Garden Produce.
21. Articles made by Patients.

Tables omitted.

Tables omitted.

Tables omitted.

Tables omitted.

Tables omitted.

**TABLE I.**

*Shewing the Admissions, Re-Admissions, Discharges, and Deaths for the year 1871.*

	Males.			Females.			Total.
	M.	F.	T.	M.	F.	T.	
In Hospital, 1st January, 1871.....	134			123			260
Admitted for the first time during the year.....	29	23	52				
Re-admitted during the year.....	5	9	14				
Total Admitted.....	34			32			66
Total under care during the year.....	168			158			326
DISCHARGED OR REMOVED.							
Recovered.....	23	18	41				
Relieved.....	3	2	5				
Not Improved.....	0	0	0				
Died.....	20	8	28				
Total discharged and died during the year.....	46			28			74
Remaining in Hospital December 31st 1871.....	122			130			252
Average number resident during the year.....	129			131			260



TABLE 2.

Showing the Admissions, Re-admissions, Discharges, and Deaths from the opening of the Hospital to the present date, December 31st, 1871.

	Males.		Females.		Totals.
	M.	F.	T.	T.	
Persons admitted during the period of thirteen years.....	166	125	291		
Re-admissions.....	37	23	60		
Total of Cases admitted.....	166	125	291		
DISCHARGED OR REMOVED.					
Recovered.....	16	4	20		
Relieved.....	80	58	138		
Not improved.....					
Died.....					
Total discharged and died during the thirteen years.....	299			210	509
Remaining December 31st, 1871.....	122			130	252
Summary of Total Admissions, 1859 to 1871.					
Per centage of Cases Recovered.....	39.43			36.76	38.24
Relieved.....	8.79			6.77	7.89
Not improved.....	3.80			1.18	2.62
Died.....	19.00			17.06	18.14
Remaining.....	28.98			28.23	33.11
Total.....	100.00			100.00	100.00
Mean Annual Mortality, 1859 to 1871.					
	6.63			5.27	6.00

TABLE 3.

Showing the Admissions, Discharges and Deaths, with the Mean Annual Mortality, and proportion of Recoveries per cent of the Admissions, for each year since the opening of the Hospital.

YEAR	ADMITTED.						DISCHARGED.						Remaining 31st Dec. in each year.			Average number Resident.			Per centage of Recoveries on Admissions.			Per centage of Deaths on average number Resident.								
	Recovered.			Not Improved.			Died.			Recovered.			Relieved.			Died.			M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
1859	39	31	70	8	3	11	2	1	3	1	...	1	...	...	28	27	55	21	21	42	20	5	15	7	...	...	...	8.8	2.8	5.7
1860	32	31	63	8	6	14	2	2	...	3	1	3	4	45	50	95	34	36	70	25	0	19	3	22	2	2	2	8.8	2.8	5.7
1861	38	22	60	14	9	23	4	1	5	...	...	...	...	62	55	117	55	50	105	36	8	40	9	38	3	3	3	5.6	14.0	9.5
1862	31	12	43	12	9	21	1	1	2	2	4	1	5	74	56	130	69	52	121	38	7	75	0	48	8	5	8	5.8	1.9	4.1
1863	30	17	47	17	5	22	6	1	6	1	5	1	6	75	67	142	70	62	132	56	7	29	4	46	8	7	1	7.1	1.6	4.5
1864	23	23	46	8	10	18	1	2	3	3	4	6	10	82	72	154	80	71	151	34	8	43	4	39	1	5	0	5.0	8.4	6.6
1865	24	22	46	12	16	28	5	2	7	1	9	5	14	79	71	150	81	74	155	50	0	72	7	60	9	11	1	11.1	6.6	9.0
1866	21	21	42	10	7	17	6	4	10	3	1	3	4	80	77	157	80	73	153	47	6	33	3	40	5	1	2	4.1	4.1	2.6
1867	25	18	43	12	7	19	1	4	5	1	4	1	5	87	82	169	86	81	167	48	0	39	0	44	0	4	6	1.2	4.6	3.0
1868	40	46	86	8	12	20	1	2	3	1	6	8	14	111	105	216	99	91	190	20	0	26	0	23	2	6	0	6.0	8.7	7.3
1869	41	38	79	22	11	33	2	2	4	...	7	6	13	121	124	245	120	114	234	53	6	29	0	41	8	5	8	5.8	5.2	5.5
1870	43	27	70	12	12	24	3	2	5	1	14	11	25	134	126	260	133	128	261	27	9	44	4	34	2	10	5	10.5	8.6	9.5
1871	35	32	66	23	18	41	3	2	5	...	20	8	28	122	131	252	129	131	260	67	6	56	2	62	1	15	5	6.0	6.0	10.7
Total.	421	340	761	166	125	291	37	23	60	16	4	20	80	58	138	Mean of 13 years.	81	76	157	40	5	39	8	39	9	6	7	6.7	5.3	6.0







TABLE 5.

Showing the causes of Death for each Year from the opening of the Hospital to the present date, December 31st, 1871.

CAUSES OF DEATH.	1860.		1861.		1862.		1863.		1864.		1865.		1866.		1867.		1868.		1869.		1870.		1871.		Totals	
	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.	M.	F.		
Cerebral or Spinal Disease																										
Apoplexy and Paralysis.....							2										1								7	
Epilepsy.....			1		1							2														9
Paresis.....			1		1		1		2		1															10
Mania, Melancholia, and Dementia.....			2	4					2		1					1										17
Thoracic Disease.																										
Gangrene of Lung.....																										3
Infla. of Lungs, Pleure, or Bronchi.....																										9
Pulmonary Consumption.....	1	1	1		1		1		3	1	1	1					3	7		5	2	8	7	3	45	
Disease of Heart, &c.....																1										11
Abdominal Disease.																										
Inflammation of Stomach, Intestines, or																										
Peritoneum.....	1				1		2					1														7
Disease of Kidney.....																										1
Ascites.....																										1
Diarrhœa.....																										1
Cancer.....																										3
Fever.....																										4
Erysipelas.....																										1
General Debility, Old Age, &c.....	2																									4
Suicide and Accidents.....			1																							5
	3	1	3	7	4	1	5	1	4	6	9	5	1	3	4	1	6	8	7	6	14	11	20	8	138	



TABLE 6.

Showing the length of Residence of those Discharged Recovered, and on those who have Died, in the year 1871.

LENGTH OF RESIDENCE.	Recovered.			Died.		
	M.	F.	Total.	M.	F.	Total.
	Under 1 month.....	2	1	3	3	...
From 1 to 3 months.....	3	3	6	...	...	...
“ 3 to 6 “.....	8	4	12	1	...	1
“ 6 to 9 “.....	4	4	8	1	...	1
“ 9 to 12 “.....	1	1	2	2	...	2
“ 1 to 2 years.....	5	4	9	4	2	6
“ 2 to 3 “.....	...	1	1	3	4	7
“ 3 to 5 “.....	...	...	...	2	...	2
“ 5 to 7 “.....	...	...	...	1	...	1
“ 7 to 10 “.....	...	...	...	2	1	3
Over 12 years.....	...	...	...	1	1	2
Total.....	23	18	41	20	8	28

Average Residence since last Admission,	{ Males.....		D.	{ Females.....	
	Y.	M.		Y.	M.
.....	...	7	3	2	11
.....	...	8	22	4	4
.....	...	...	...	...	...
.....	...	...	...	...	13

TABLE 7.

Showing the Duration of the Disorder on Admissions, Discharges, and Deaths during the year 1871.

CLASS.	Duration of Disease on Admission, etc., in Four Classes.											
	The Admissions.			Recovered.			Remov'd, Reliev'd or otherwise.			The Deaths.		
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
FIRST CLASS.												
First attack, and within three months on admission.....	10	6	16	5	4	9	.....	1	1	.....	1	1
SECOND CLASS.												
First attack, above three and within twelve months on admission.....	3	6	9	1	1	2	1	.....	1	.....	1	1
THIRD CLASS.												
Not first attack, and within twelve months on admission.....	12	12	24	15	12	27	1	.....	1	.....	3	3
FOURTH CLASS.												
First attack or not, but of more than twelve months on admission.....	6	4	10	.....	1	1	1	1	1	2	12	5
Not ascertained.....	3	4	7	2	.....	2	.....	.....	.....	.....	3	.....
Total.....	34	32	66	23	18	41	3	2	5	20	8	28





**TABLE 9.**

*Condition as to marriage in the Admissions, Discharges, and Deaths, during the year 1871*

	The Admissions.			The Discharges.						The Deaths.				
	M.	F.	T.	Recovered.			Removed Relieved, or otherwise.			M.	F.	T.		
				M.	F.	T.	M.	F.	T.					
Single .....	12	10	22	8	3	11	1	.....	1	.....	1	14	3	17
Married .....	12	11	23	6	6	12	1	2	3	1	1	1	1	2
Widowed.....	5	1	6	2	.....	2	.....	.....	.....	4	2	6	.....	.....
Re-admissions, and not ascer- tained.....	5	10	15	7	9	16	1	.....	1	.....	1	1	2	3
	34	32	66	23	18	41	3	2	5	20	8	28		



TABLE 10

Showing the probable Causes, apparent or assigned, of the disorder in the Admissions, Discharges and Deaths of the year 1871.

CAUSES.	The Admissions			The Discharges.						The Deaths.		
				Recovered.			Relieved.					
	M.	F.	T.	M.	F.	F.	M.	F.	T.	M.	F.	T.
MORAL.												
Fright.....	00	2	2	1	00	1	00	00	00	00	1	1
Domestic Trouble . . . . .	00	1	1	1	2	3	1	1	2	1	1	2
Grief.....	00	2	2	1	1	2	00	1	1	1	1	2
Religious Anxiety.....	1	00	1	00	00	00	00	00	00	1	00	1
Disappointed as to property	4	00	4	2	00	2	00	00	00	1	00	1
Disappointed Affection.....	1	2	3	00	00	00	00	00	00	1	1	2
Lawsuit, and Resisting Taxes	1	00	1	2	1	3	00	00	00	00	00	00
Over study.....	1	1	2	00	2	2	00	00	00	00	00	00
PHYSICAL.												
Hereditary.....	2	7	9	2	3	5	00	00	00	2	00	2
Age.....	00	00	00	00	00	00	1	00	1	00	1	1
Intemperance . . . . .	7	1	8	4	00	4	00	00	00	4	00	4
Sun stroke.....	00	00	00	1	00	1	00	00	00	00	00	00
Epilepsy (and Masked).....	2	00	2	1	00	1	00	00	00	3	00	3
Puerperal.....	00	3	3	00	2	2	00	00	00	00	1	1
Uterine Disease.....	00	2	2	00	00	00	00	00	00	00	00	00
Miscarriage.....	00	00	00	00	1	1	00	00	00	00	00	00
Hysteria.....	00	00	00	00	1	1	00	00	00	00	00	00
Prolonged Lactation.....	00	1	1	00	2	2	00	00	00	00	00	00
Over exertion.....	00	3	3	00	1	1	00	00	00	00	1	1
Erysipelas.....	00	1	1	00	1	1	00	00	00	00	00	00
Injury from fall.....	00	00	00	2	00	2	00	00	00	1	00	1
Injury to Head.....	1	00	1	00	00	00	00	00	00	00	00	00
Disease of Brain.....	1	00	1	00	00	00	00	00	00	00	00	00
Ill health.....	3	00	3	00	00	00	00	00	00	1	00	1
Not stated.....	10	6	16	6	1	7	1	00	1	4	1	5
Total.....	34	32	66	23	18	41	3	2	5	20	8	28

TABLE II.

Monthly admissions and discharges from January 1859 to December 31st, 1871.

	January.	February.	March.	April.	May.	June.	July.	August.	September.	October.	November.	December.	Males.	Females.	Total.
1859 to 1870.															
Admitted.....	54	47	41	52	71	78	62	50	76	48	64	50	387	308	695
Discharged....	31	19	22	35	41	45	40	37	35	46	42	42	253	182	435
1871.															
Admitted.....	5	6	4	3	4	12	7	5	5	7	4	4	34	32	66
Discharged.....	4	8	5	7	5	6	11	5	4	7	6	6	46	28	74
Remaining.....	261	259	258	254	253	259	255	255	256	256	254	252	122	130	252



**TABLE 12.***Alleged Ages of All Admitted.*

	1871.	1859-71.	Total.
From 5 to 10 years.....	.....	4	4
“ 10 to 20 “ .....	2	37	39
“ 20 to 30 “ .....	16	178	194
“ 30 to 40 “ .....	19	153	172
“ 40 to 50 “ .....	15	113	128
“ 50 to 60 “ .....	6	74	80
“ 60 to 70 “ .....	4	46	50
“ 70 to 80 “ .....	2	21	23
“ 80 to 90 “ .....	.....	1	1
Unknown .....	2	68	70
<b>Total</b> .....	<b>66</b>	<b>695</b>	<b>761</b>

**TABLE 13.***Civil Condition of all Admitted.*

		Married.	Single.	Widowed.	Unknown.	Re-admitted.	Total.
1859-70.	{ Males .....	118	196	10	18	45	387
	{ Females.....	112	127	27	7	35	308
1871.	{ Males .....	13	12	4	.....	5	34
	{ Females.....	11	10	1	1	9	32
1859-71.	{ Males .....	131	208	14	18	50	421
	{ Females.....	123	137	28	8	44	340
Total.....		254	345	42	26	94	761

TABLE 14.

*Former residence (corrected by separation of Re-admissions.)*

	1871.		1859-70.		Total 1859-71.	Population in 1871.
	Admissions.	Re-admissions.	Admissions.	Re-admissions.		
Halifax City and County...	24	6	200	32	262	56963
Colchester County.....	4	2	43	6	55	23331
Cumberland " .....	2	1	25	3	31	23518
Pictou " .....	2	2	69	9	82	32114
Antigonishe " .....		1	13	1	15	16512
Guysboro' " .....			19	1	20	16555
Inverness " .....	1		9		10	23415
Richmond " .....			5		5	14268
Victoria " .....	1		5		6	11346
Cape Breton " .....	3		28	9	40	26454
Hants " .....	2		39	8	49	21302
Kings " .....	6		33	3	42	21509
Annapolis " .....	4	1	15	1	21	18121
Digby " .....	2		3	1	6	17037
Yarmouth " .....			7		7	18550
Shelburne " .....			1	1	2	12417
Queens " .....			13	3	16	10554
Lunenburg " .....	1	1	22	2	26	23834
Newfoundland.....			3		3	
New Brunswick.....			10		10	
P. E. Island.....			2		2	
Barbadoes .....			1		1	
St. Thomas.....			1		1	
United States.....			15		15	
England.....			2		2	
Ireland.....			6		6	
Scotland.....			1		1	
Germany.....			1		1	
Norway.....			2		2	
Sweden.....			1		1	
India .....			1		1	
H. M. Service.....			9		9	
Unknown .....			11		11	
Total.....	52	14	615	80	761	387800



TABLE 15.

*Former occupation, so far as ascertained.*

	1871.		1859-70.		Total.	
	M.	F.	M.	F.	M.	F.
Architect's Wife.....		1				1
Barrister.....			1		1	
Bakers' Wife.....				1		1
Blacksmiths and Wives.....			4	5	4	5
Barbers.....			3		3	
Basket Maker.....				1		1
Brewer.....	1				1	
Brass Founder.....			1		1	
Butcher.....		1	1		1	1
Carpenters and wives.....	2	1	11	9	13	10
Clerks, Book-keepers and Wives...			9	1	9	1
Collector of Customs.....			1		1	
Cabinet Makers and Daughters....			2	2	2	2
Colliers.....			5		5	
Coopers.....			3		3	
Coachman and Wife.....			1	1	1	1
Dressmakers.....		2		2		4
Engineer and Wife. ....			1	1	1	1
Farmers, Sons, Wives, & Daughters	14	3	113	57	127	60
Fishermen and Wives.....	1		14	5	15	5
Gentlemen and Gentlewomen.....		1	9	13	9	14
Governess.....				1		1
Gold Miner .....	1				1	
Grocer and Wife.....			1	1	1	1
Hotel Keepers .....			3		3	
Hostler.....			1		1	
Laborers, and Wives, and Servants	3	4	41	55	44	59
Lumberman .....			1		1	
Masons and Wives, and Daughters.			9	3	9	3
Ministers and Daughters.....	1		1	1	2	1
Millers and Widows.....			1	2	1	2
Merchants and Wives.....		2	1	8	1	10
Milliners.....				2		2
Physician.....			1	2	1	2
Priest.....			1		1	

TABLE 15—Continued.

*Former occupation, so far as ascertained.*

	1871		1859-70.		Total.	
	M.	F.	M.	F.	M.	F.
Printers.....			5	1	5	1
Painters.....	1	1	5		6	1
Pensioners.....			2	5	2	5
Paper Folders.....			1	1	1	1
Pedlars and Wives.....			4	1	4	1
Plumbers and Tinsmiths.....			2		2	
School Teachers and Wives.....	1		8	6	9	6
Ship Captains, Wives and Stevedore	2		3	4	5	4
Seamen and Wives.....		1	31	8	31	9
Soldiers and Marines.....			9		9	
Shoemakers and Wives.....	1	1	9	1	10	2
Saddler.....			2		2	
Seamstress.....		1		3		4
Students.....			3		3	
Surveyors.....			1		1	
Shop Keepers.....				2		2
Tailor's Wife.....				1		1
Tanner's Wife.....				2		2
Teamster and Wife.....	1	1			1	1
Trader.....	1				1	
Wood Sorter.....			1		1	
Wheelwright.....			1		1	
Washerwomen.....		1		5		6
Watchmen and Wives.....			1	2	1	2
Watchmaker.....			1		1	



TABLE 16.

*Re-Admissions from 1859 to 1871.*

	1861.	1862.	1863.	1864.	1865.	1866.	1867.	1868.	1869.	1870.	1871.	Total.	Admitted Twice.	Admitted Three Times.	Admitted Four Times.	Admitted Five Times.	Admitted Six Times.	Remaining 31st Decem-ber of Re-Admis-sions.
Males.....	5	6	..	2	7	1	2	5	6	11	5	50	40	3	..	1	..	18
Females.....	2	1	2	3	2	2	2	5	6	10	9	44	26	3	1	1	1	14
Total.....	7	7	2	5	9	3	4	10	12	21	14	94	66	6	1	2	1	32

TABLE 17.

*Maintenance of Patients in Hospital, December 31st, 1871.*

	M.	F.	Total.
Annapolis County.....	3	7	10
Antigonish “.....	5	.....	5
Colchester “.....	3	4	7
Cape Breton “.....	8	7	15
Cumberland “.....	3	2	5
Digby “.....	.....	1	1
Guysboro “.....	4	2	6
Halifax “.....	33	39	72
Hants “.....	5	6	11
Inverness “.....	6	1	7
Kings “.....	4	8	12
Lunenburg “.....	1	4	5
Pictou “.....	11	14	25
Queens “.....	1	1	2
Richmond “.....	1	1	2
Victoria “.....	1	.....	1
Yarmouth “.....	1	.....	1
Province of Nova Scotia.....	18	9	27
Private Patients.....	14	19	33
Brown Fund.....	.....	3	3
Bell Fund.....	.....	2	2
Total.....	122	130	252



**TABLE 18.**  
*Cost of the Principal Items of Provisions for the year 1871, Compiled from the Quarterly Returns.*

ARTICLES.	ARTICLES.				ARTICLES.	Contract Prices.				
	Quarter End- ing March 31.	Quarter End- ing June 30.	Quarter End- ing Sept. 30.	Quarter End- ing Dec. 31.		1870.	1871.			
Flour, . . . . .	104 \$ 728 00	110	770 00	103	721 00	125	875 00	Flour . . . . .	\$6 00	\$7 00
Butter, . . . . .	1135	1127	264 84	1224	287 16	1177	276 59	Butter, . . . . .	25	23½
Tea, . . . . .	535	522	198 36	556	211 28	591	224 58	Tea, . . . . .	41	38
Brown Sugar, . . . . .	2394	2398	227 81	2361	224 29	2431	230 84	Brown Sugar, . . . . .	09½	09½
Crushed Sugar, . . . . .	177	174	20 88	331	39 72	215	25 80	Crushed Sugar, . . . . .	12	12
Coffee, . . . . .	112	102	20 40	110	22 00	121	24 20	Coffee, . . . . .	23	20
Chocolate, . . . . .	104	105	26 25	136	34 00	117	29 25	Chocolate, . . . . .	25	25
Beef, . . . . .	12598	944 85	1017 97	12093	906 97	10776	808 20	Beef, . . . . .	6 98	7 50
Pork, . . . . .	1331	93 17	25 69	1190	77 49	843	59 01	Pork, . . . . .	09	07
Mutton, . . . . .	354	26 55	--	1312	98 40	2873	215 47	Mutton, . . . . .	6 98	7 50
Veal, . . . . .	--	738	55 35	349	26 17	--	--	Veal, . . . . .	6 98	7 50
Peas, . . . . .	180	6 30	200	7 70	--	--	--	Peas, . . . . .	02	03½
Molasses, . . . . .	674	249 38	645	654	241 98	551	203 87	Molasses, . . . . .	43	37
Rice, . . . . .	1095	54 75	962	900	45 00	919	45 95	Rice, . . . . .	04	05
Barley, . . . . .	719	43 14	770	711	42 66	748	44 88	Barley, . . . . .	06	06
Oatmeal, . . . . .	2080	67 60	1723	1810	58 82	1785	58 01	Oatmeal, . . . . .	03	03½
Cornmeal, . . . . .	1779	40 03	1755	1431	32 19	1743	39 22	Cornmeal, . . . . .	02½	02½
Fish (dry), . . . . .	3300	148 50	3300	3295	148 27	3241	145 84	Fish (dry), . . . . .	03½	04½
Cheese, . . . . .	333	83 25	179	261	65 25	199	49 75	Cheese, . . . . .	25	25
Biscuit, . . . . .	931	67 49	531	720	52 20	702	50 89	Biscuit, . . . . .	06	07½
Apples, . . . . .	20	55 00	8½	5	13 75	14	38 50	Apples, . . . . .	2 70	2 75
Potatoes, . . . . .	480	240 00	488	481	240 50	442	221 00	Potatoes, . . . . .	33	50
Vinegar, . . . . .	66	15 84	40½	73	17 52	60	14 40	Vinegar, . . . . .	20	24
Salt, . . . . .	26	12 48	34	38	18 24	34½	16 56	Salt, . . . . .	50	48
Onions, . . . . .	--	291	13 09	185	8 32	778	35 01	Onions, . . . . .	03	04½
	\$3645 42	\$3601 86	\$3633 66	\$3732 82	Total, . . . . .	\$14611 76				

Average daily number of Patients 250 being at the rate per annum for Provisions per Patient \$56.20.



TABLE 19.

*Expenditure for Labor, as shown by the Pay Lists, also for Salaries, 1871*

January.....	\$470 95	
February.....	461 95	
March.....	500 77	
Salaries .....	1252 00	
		\$2685 67
April.....	485 17	
May.....	499 03	
June.....	502 40	
Salaries .....	1252 00	
		2738 60
July.....	473 59	
August.....	465 30	
September.....	465 30	
Salaries.....	1252 00	
		2656 19
October.....	475 27	
November.....	463 90	
December.....	479 55	
Salaries.....	1252 00	
		2670 72
		<u>          </u>
Total.....		<u>\$10751 18</u>

As predicted in last years Report, the difference in the contract price for provisions has caused an increased maintenance rate for 1871 as compared with 1870. The cost of the important article of Flour has been \$7.00 per barrel this year, against \$6.00 the year before. This one item goes far towards accounting for the increase in the average cost of provisions per patient from \$52.77 in 1870, to \$56.20 in 1871.

The expenditure for food and attendance, although higher than in 1870, is considerably below the average of former years. Owing to a temporary reduction to Dominion Currency, of the salaries of several of the officers, from June to December, a strictly accurate comparative statement can scarcely be presented at the present time.



**TABLE 20.***Field and Garden Produce, 1871.*

Carrots.....	260 bushels.	Beans.....	55 bushels.
Parsnips.....	31 “	Peas.....	12 “
Beets.....	75 “	Onions.....	10 “
Turnips .....	92 “	Tomatoes .....	2 “
Mangold .....	425 “	Rhubarb.....	21 “
Radishes .....	20 “	Corn.....	16 “
Celery .....	416 heads.	Lettuce.....	175 dozen
Cabbage.....	795 “	Squash.....	114

Early Potatoes, Cucumbers, Asparagus, Spinach and Sweet Herbs.

**TABLE 21.***List of Articles made by the Female Patients, 1871.*

177 Cotton Shirts,	25 Colored Skirts,
75 Fleecy “	182 Dresses,
75 Flannel “	47 Jackets,
56 Fleecy Drawers,	162 Cotton Chemise,
37 Flannel “	19 Woolen “
151 Pants,	52 Flannel Petticoats,
33 Vests,	196 Sheets,
65 Coats,	226 Pillow Cases,
146 Neckerchiefs,	43 Pillow Ticks,
26 Handkerchiefs,	216 Bolster Cases,
355 Pairs Woolen Socks,	51 Bolster Ticks,
104 “ “ Stockings,	270 Bed Ticks,
39 “ Cotton “	14 Mattress Covers,
24 “ Mittens,	47 White Quilts,
43 Night Gowns,	48 Comforts,
26 Night Caps,	20 Toilet Covers,
28 Day Caps,	230 Towels and Rollers,
64 Aprons,	10 Clothes Bags,
22 Hoods,	57 Dusters,
17 Hats and Bonnets,	22 Table Cloths,
22 Collars,	20 Bread Bags.





**REPORTS, ETC., RECEIVED.****1871.**

- Aberdeen, Royal Lunatic Asylum, Medical Report for 1870, by Robert Jamieson, M.D., Physician and Superintendent.
- Alabama Insane Hospital, Tenth Annual Report 1870, by P. Bryce, M.D., Superintendent and Physician.
- Anæsthetics, by Edward R. Squibb, M.D., Brooklyn, N. Y., 1870.
- Autopsy of a Case of Mania, by A. M. Shew, M.D., Superintendent General Hospital for Insane, Middletown, Conn., and E. C. Seguin, M.D., Pathologist.
- Baltimore, Mount Hope Institution and Retreat, Twenty Eighth Annual Report 1870, by W. H. Stokes, M.D., Attending Physician.
- Bridewell and Bethlehem, Royal Hospitals, (and King Edwards Schools,) General Report for 1870, by Rhys Williams, M.D., M.R.C.P.L., Resident Physician.
- Brigham Hall, Canandaigua, New York, Report for 1870, by Geo. Cook, M.D., Resident Physician.
- Broadmoor State Asylum, Wokingham, Annual Report 1870, by W. Orange, M.D., Medical Superintendent.
- Cambridgeshire County Asylum, (Fulbourn) Report for 1870, by G. McKenzie Bacon, M.D., F.R.C.S.E., Medical Superintendent.
- Canada, Dominion of—Second Annual Report of Directors of Penitentiaries, 1870, including Report of Rockwood Asylum, Kingston, Ontario, from E. A. Meredith, Esq., Ottawa.
- Commissioners in Lunacy, Twenty Fourth and Twenty Fifth Reports to the Lord Chancellor 1870-1871, with Appendices, London; Charles Palmer Philips, Esq., Secretary.



- Commissioners in Lunacy for Scotland, General Beard, Twelfth and Thirteenth Annual Reports, Edinburgh, 1869-70, W. Forbes, Esq., Secretary.
- Connecticut General Hospital for Insane, Fifth Annual Report 1871, by A. M. Shew, M.D., Superintendent and Physician.
- Crichton Royal Institution, Thirty-first Annual Report 1870, by James Gilchrist, M.D., Medical Superintendent.
- Cumberland and Westmoreland Lunatic Asylum Report for 1870, by T. S. Clouston, M.D., Medical Superintendent.
- Dorset County Lunatic Asylum, Annual Report 1870, by J. Gustavus Symes, Esq., Medical Superintendent.
- Dorset Asylum, Charminster, Regulations and Orders for guidance of Male Attendants, from Dr. J. Stewart, Assistant Physician.
- Dublin, Richmond District Lunatic Asylum, Report for 1870, by Joseph Lalor, M.D., Resident Medical Superintendent.
- Gynæcological Society, Boston, Mass, Constitution and By-Laws, 1869, Horatio R. Storer, M.D., Secretary.
- Illinois State Hospital for Insane, (Jacksonville) Report for 1870, by H. F. Carriel, M. D., Superintendent and Physician.
- Indiana Hospital for Insane, Report for 1870, by O. Everts, M.D., Superintendent.
- Insanity in Relation to Law, by Henry Landor, M.D., Superintendent, London Asylum, Ontario.
- Iowa Hospital for the Insane, Fourth and Fifth Bi-ennial Reports, 1871, by Mark Ranney, M.D., Superintendent.
- Kentucky, Eastern Lunatic Asylum, Lexington, Report for 1870, by John W. Whitney, M.D., Superintendent.
- Kentucky, Western Lunatic Asylum, Hopkinsville, Report for 1870, by James Rodman, M.D., Superintendent.
- Kings' College, (Windsor, N. S.) University Magazine, 1871.
- London Ontario, Asylum for the Insane, Report to Sept. 30, 1871, by Henry Landor, M.D., Superintendent.
- Maine Insane Hospital, Report for 1871, by Henry M. Harlow, M.D., Superintendent and Physician.
- Marine and Fisheries, Annual Report of the Department for 1870, Ottawa.



- Massachusetts, Board of State Charities, Seventh Annual Report, 1870, Edward L. Peirce, Esq., Secretary.
- Massachusetts, General Hospital, (including McLean Asylum, Somerville), Annual Report for 1869-70. John E. Tyler, M.D., Superintendent.
- Medical Cosmos, July 1871, by Geo. Zeigler, M.D., Philadelphia.
- Maryland Hospital for the Insane, Forty-second Report for 1870 and '71, by Richard S. Stewart, M.D., Resident Physician.
- Maryland, Hospital for the Insane, Baltimore, By-laws, with other regulations, 1871.
- Medical Education in America, Annual Address read before the Massachusetts Medical Society, June 1871, by Henry J. Bigelow, M.D., Professor of Surgery, Harvard University, Boston.
- Mechanical Restraint, Observations on, with notes of a visit to some of the Principal Hospitals for the Insane in Great Britain, France, and Germany, by A. O. Kellogg, M.D.
- Mineralogy of Nova Scotia, contributions to, by Professor How, D.C.L., University of Kings College, Windsor, N. S., (from the Philosophical Magazine, April 6, 1871).
- Minnesota Hospital for Insane, Fourth Annual Report 1870, by Cyrus K. Bartlett, M.D., Superintendent; from W. J. Lydiard, Esq.
- Mississippi State Lunatic Asylum, Annual Report for 1870, by W. M. Compton, M.D., Medical Superintendent.
- Missouri, St. Louis County, Insane Asylum Report to April 1870, by Charles W. Steves, M.D., Superintendent, and Physician.
- Neurotic Medicines, action of in Insanity, by T. S. Clouston, M.D., Medical Superintendent, Cumberland and Westmoreland Asylum, Carlisle; Fothergillian Prize Essay for 1870.
- New Brunswick, Provincial Lunatic Asylum, St. John, Report for 1870, by John Waddell, M.D., Medical Superintendent.
- New Hampshire, Asylum for the Insane, Report for 1870-71, by J. P. Bancroft, M.D., Superintendent, Treasurer, and Physician.
- New Jersey State Lunatic Asylum Trenton, Report to October, 1871, by H. A. Buttolph, M.D., Superintendent and Physician.



- New South Wales, Hospital for the Insane, Gladesville, Report for 1870, by F. Norton Manning, M.D., Superintendent.
- New South Wales, Report of an official visit to the Lunatic Asylums in the United Kingdom, on the Continent, and in the United States; submitted to the Government of New South Wales, with suggestions for the establishment of a Asylum system, and the construction and management of Asylums, by F. Norton Manning, M.D., Superintendent of Hospital for Insane, Gladesville, N. S. W.
- New York Asylum for Idiots, Syracuse, Twentieth Annual Report for 1870, by H. B. Wilbur, M.D., Superintendent.
- New York City Lunatic Asylum, annual Report 1870, by R. L. Parsons, M.D., Resident Physician.
- New York, Kings County Lunatic Asylum, Flatbush, Report to July 31, 1871, by E. R. Chapin, M.D., Resident Physician.
- New York, State Lunatic Asylum, Utica, Report for 1870, by John P. Gray, M.D., Superintendent and Physician.
- Northampton, Mass., State Lunatic Hospital, Report to October 1871, by Pliny Earle, A.M., M.D., Superintendent.
- North Carolina, Insane Asylum, Report for 1870, by Eugene Grissom, M.D., Physician and Superintendent.
- Nottingham County and Borough Lunatic Asylum, Annual Report for 1870, by W. Phillimore Stiff, M.B., Resident Physician and Superintendent.
- Ohio, Longview Asylum, Twelfth Annual Report for 1871, by J. T. Webb, M.D., Superintendent and Physician.
- Ohio, Northern Lunatic Asylum, Sixteenth Annual Report for 1870,, by J. M. Lewis, M.D., Superintendent.
- Ohio, Southern Lunatic Asylum, Dayton, Annual Report for 1870, by Richard Gundry, M.D., Physician and Superintendent.
- Ontario, Fourth Annual Report of Inspector of Asylums, Prisons, &c., 1870-71, J. W. Langmuir, Esq., Inspector, Toronto.
- Ontario, Report of Commissioner of Public Works, 1869-70, with description of Lunatic Asylums at Toronto, and



London, and of Deaf and Dumb Institution at Belleville, by Honble. John Carling, M.P.P., Commissioner of Public Works,

Pennsylvania Hospital for the Insane, Report for the year 1870, by Thomas S. Kirkbride, M.D., Physician-in-Chief and Superintendent.

Pennsylvania, Northern District, Hospital for Insane, Danville, First, Second, and Third Reports, 1868-69-70, by S. S. Schultz, M.D., Superintendent.

Pennsylvania State Lunatic Asylum, Harrisburg, Report for 1870, by John Curwen, M.D., Medical Superintendent.

Philadelphia, (Western) Hospital for Insane, Dixmont, Report for 1870, by Joseph A. Feed, M.D., Superintendent and Physician.

Philadelphia Asylum for relief of persons deprived of their Reason, Report for 1870, by W. H. Worthington, M.D., Superintendent.

Philadelphia Alms House, Report for 1870, by D. D. Richardson, M.D., Superintendent Insane Department.

Prince Edward's Island, Lunatic Asylum, Charlottetown, Twenty-first Annual Report for 1870, by J. Mackieson, M.D., Medical Superintendent.

Quebec, Inspectors of Prisons, Asylums, &c., Second and Third Reports, 1869-70, from F. E. Roy, M.D.L., Physician, &c., Beauport Lunatic Asylum.

Quebec Literary and Historical Society Transactions for 1869-70 and 1870-71, Parts 7 and 8, from W. J. Anderson, M.D., M.R.C.S., President.

Rockwood Lunatic Asylum, Kingston, Ontario, Report for 1870, by John R. Dickson, M.D., F.R.C.S.E., Medical Superintendent.

Schools in Nova Scotia, Common, Superior, Academic, Normal, and Model; Annual Report 1870, by Revd, A. S. Hunt, A.M., Superintendent of Education.

Somerset County Lunatic Asylum, Wells, Twenty-third Annual Report for 1870, by C. W. Carter Madden Medlicott, M.D., Resident Physician and Superintendent.

Stafford County Lunatic Asylum, Report for 1870, by Mark N. Bower, M.D., M.R.S.C.E., Resident Medical Officer and Superintendent.



- Statistical Tables, Report of Committee appointed by Association of Medical Superintendents of American Institutions for the Insane, Dr. E. Jarvis, M.D., Dorchester, Mass.
- Surrey County Lunatic Asylum, Brookwood, Annual Report to April 1871, by T. N. Brushfield, M.D., Medical Superintendent.
- Taunton (Mass) State Lunatic Hospital, Seventeenth Annual Report to October 1870, by W. W. Godding, M.D., Superintendent.
- Tennessee Hospital for Insane, Nashville, Eighth Bi-ennial Report to November 1871, by John H. Callender, M.D., Physician and Superintendent.
- Toronto, Provincial Lunatic Asylum, Report for 1869-70, by Joseph Workman, M.D., Medical Superintendent.
- Victoria, Hospitals for the Insane, Melbourne, Carlton, Ararat, and Beechworth; Report of Inspector of Asylums for 1870, by E. Paley, M.D., Superintendent Yarra Bend Asylum, and Inspector of Lunatic Asylums, Victoria.
- Virginia Central Lunatic Asylum (for Colored Insane,) Report to October 1870, by Daniel B. Conrad, M.D., Physician and Superintendent.
- Virginia, Eastern Lunatic Asylum, Report for 1870, by D. R. Brower, M.D., Superintendent.
- Victoria, Western Lunatic Asylum, Report for 1869-70, and 1870-71, by Francis T. Stribling, M.D., Medical Superintendent.
- Willard Asylum for the Insane, Ovid, N. Y., Report for the year 1870, by John B. Chapin, M.D., Superintendent.
- Witts County Asylum, Devizes, Report for 1870, by John Thurnham, M.D., Medical Superintendent.
- Wisconsin, State Hospital for the Insane, Madison, Annual Report for 1870-71, by A. S. McDill, M.D. Superintendent.
- Wisconsin, State Board of Charities and Reform, First Annual Report to December 1871., Samuel D Hastings, Esq., Secretary.
- York Lunatic Asylum, Bootham, Supplemental Report, 1870, by F. Needham, M.D., Medical Superintendent.



Statistical Tables, Report of Committee appointed by Association of Medical Superintendents of American Institutions for the Insane, Dr. E. Jarvis, M.D., Dorchester, Mass.

Savoy County Lunatic Asylum, Brookwood, Annual Report to April 1871, by T. N. Brimfield, M.D., Medical Superintendent.

Tarrant (Mass) State Lunatic Hospital, Eventeenth Annual Report to October 1870, by W. W. Colting, M.D., Superintendent.

Tennessee Hospital for Insane, Nashville, Eighth Biennial Report to November 1871, by John H. Gallender, M.D., Physician and Superintendent.

Toronto Provincial Lunatic Asylum, Report for 1869-70, by Joseph Workman, M.D., Medical Superintendent.

Victoria Hospitals for the Insane, Melbourne, Carlton, Ararat, and Beechworth, Report of Inspector of Asylums for 1870, by E. Peley, M.D., Superintendent.

Virginia Eastern Lunatic Asylum, Report for 1870, by D. B. Brower, M.D., Superintendent.

Virginia Western Lunatic Asylum, Report for 1869-70 and 1870-71, by Francis T. Stuebeling, M.D., Medical Superintendent.

Willard Asylum for the Insane, Ovid, N. Y., Report for the year 1870, by John B. Chapin, M.D., Superintendent.

Witte County Asylum, DeWitt, Report for 1870, by John B. Chapin, M.D., Medical Superintendent.

Wisconsin State Hospital for the Insane, Madison, Annual Report for 1870-71, by A. S. McMillin, M.D., Superintendent.

Wisconsin State Board of Charities and Reform, First Annual Report to December 1871, Samuel D. Harris, Secy.

York Lunatic Asylum, Boothbay, Supplemental Report 1870, by F. Needham, M.D., Medical Superintendent.



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**APPENDIX.**

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**ADMISSION OF PATIENTS.**

In order to be benefitted by Hospital treatment, Patients should be placed under care at an early stage of their disease. The Hospital being already filled, admissions are necessarily restricted to cases of recent occurrence, which by law have a preferential claim.

The first step towards the reception of a Patient into Hospital, is to ascertain whether there be a vacancy, by enquiring at the office of the Department of Works, or of the Medical Superintendent. *No Patient should be sent until this enquiry has been made. It will often save disappointment and expense.*

A full statement of each case, in answer to questions hereto appended, should be forwarded with the application, giving all the particulars in as accurate and correct a manner as practicable, with the aid of those best qualified to afford the required information.

If the patient can be received, the insanity must be certified by two Medical men, separately, according to a printed form. *Attention is requested to a foot note on the Blank Certificate.*

Two good suits of clothing, at the least, should be sent with every patient. A third suit for occasional use is very desirable.

Those about to be committed to Hospital should *invariably* be informed of it *before leaving home*. Everything like deception must be scrupulously avoided. No promise as to the precise time of their return should ever be made. A twelve-month's residence in every case should be provided for.

If the friends can afford the cost of maintenance, they are required to pay the first quarter's board, fifty dollars (\$50), in advance, at the office of the Works Department, and *an order from that office is required before admission*. If unable to pay the customary rate, the friends can petition for a reduction.

Those who have no means of payment, are chargeable to their respective counties, and for this class an order signed by two Justices of the Peace is required.



The Medical Certificates furnish the evidence on which the Justices grant their order. No depositions of witnesses are required, nor is a public investigation called for in any case.

Should any further information be required respecting admission, it will be promptly afforded by the Medical Superintendent.

#### DISCHARGE OF PATIENTS.

When a patient recovers, the friends are notified, and upon their application, with the Medical Superintendent's certificate, the order for discharge is granted by the Department of Works.

If the removal be desired before the patient is restored, and contrary to the advice of the Superintendent, the friends are required, before the order for discharge is granted, to enter into bonds for the safe keeping and proper care of the patient.

In cases of doubtful recovery, it is now customary to grant leave of absence "on trial" for a period varying from one to six months; if a relapse occur during this probationary period, the patient is at once re-admitted without any new formalities.

STATEMENT TO BE FORWARDED TO THE MEDICAL SUPER-INTENDENT, WHEN APPLICATION IS MADE FOR THE REGISTRATION OF A PATIENT.

1. Name of patient (in full)
2. Where born
3. Son (or daughter) of
4. Residence, County of
5. Age, Last Birthday
6. State as to Marital
7. Number and age of (children)
8. Occupation (or that of Father or Husband)
9. Natural Disposition
10. Habits, in Health—as to Temperance, etc.
11. Education
12. Religion
13. Age at first attack
14. Seasonally, how first manifested
15. Number and duration of attacks
16. Where under treatment, and when
17. What relatives similarly affected
18. Supposed cause, Heredity
19. " " " " " "
20. Duration of present attack
21. State as to sleep
22. Appetite for food
23. State of bodily Health
24. Whether subject to Epilepsy
25. Any interesting symptoms, or loss of power, and when
26. Present Habits and Dispositions
27. What Delusions
28. Whether suicidal (attempted or threatened), and how
29. If dangerous to others, how
30. Primary Circumstances (or to whom chargeable)
31. Post-office address of nearest friend, and degree of relationship
32. Other particulars



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

Done at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_.

Witness my hand and seal of office at \_\_\_\_\_ this \_\_\_\_\_ day of \_\_\_\_\_ 19\_\_.

NOTE—If any of these particulars be not known, the fact to be so stated. No patient to be sent to Hospital, until a reply shall have been received to this Statement.



STATEMENT TO BE FORWARDED TO THE MEDICAL SUPER-  
INTENDENT, WHEN APPLICATION IS MADE FOR THE  
RECEPTION OF A PATIENT.

1. Name of patient (in full).
2. Where born,
3. Son (or daughter) of,
4. Residence, County of,
5. Age, Last Birthday,
6. State as to Marriage,
7. Number and age of Children,
8. Occupation, (or that of Father or Husband,)
9. Natural Disposition,
- 10: Habits, in Health,—as to Temperance, etc.,
11. Education,
12. Religion,
13. Age at first attack,
14. Insanity, how first manifested,
15. Number and duration of attacks,
16. Where under treatment, and when,
17. What Relatives similarly affected,
18. Supposed cause, Remote,
19. " " Recent,
20. Duration of present attack,
21. State as to sleep,
22. Appetite for food,
23. State of bodily Health,
24. Whether subject to Epilepsy,
25. Any faltering of Speech, or loss of power, and when,
26. Present Habits and Propensities,
27. What Delusions,
28. Whether Suicidal (attempted or threatened), and how,
29. If dangerous to others, how,
30. Pecuniary Circumstances, (or to whom chargeable,)
31. Post-office address of nearest friend, and degree of relationship,
32. Other particulars.

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

Date,

Name,  
Address,

N.B.—If any of these particulars be not known, the fact to be so stated. No patient to be sent to Hospital, until a reply shall have been received to this Statement.



## CERTIFICATE.

(a) Name in full. I, the undersigned <sup>a</sup>  
 (b) Qualification. being <sup>b</sup> and in actual practice,  
 hereby certify that I, on the day of  
 (c) Locality. 18 at <sup>c</sup> in the County of  
 separately from any other Medical Practitioner,  
 (d) Name in full personally examined <sup>d</sup>  
 (e) Residence. of <sup>e</sup> (f) and that the said  
 (f) Occupation. 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 on the  
 following grounds, viz. :

1. Facts indicating insanity observed by  
 myself : \*

1. Appearance.
2. Conduct.
3. Conversation.

(g) State the information, and from whom. 2. Facts, indicating insanity, communi-  
 cated to me by others : <sup>e</sup>

Name

Place of Residence

Date

**N.B.**—Two Certificates (dated within one month of the commitment) are required in every case. The second should not be signed by the father, brother, son, or assistant of the Medical Practitioner, who has signed the first certificate.

\* The facts upon which (from personal observation) the opinion of insanity has been formed, should always be specified.



## DUTIES OF ATTENDANTS AND OTHERS.

1. Attendants are expected to devote their whole time to the Hospital, in the performance of the duties required of them.

2. They must expect a constant observation of the manner in which their duties are performed; and use their utmost endeavors to render all those entrusted to their care contented and comfortable.

3. They will be careful at all times to set a good example, and shall explain to the patients that their restoration and comfort is the leading object of the Institution.

4. In all their intercourse with the patients, the attendants will treat them with due civility, avoiding violence and rudeness of every kind. All reasonable requests are to be promptly attended to.

5. No attendant shall be excused, under any circumstances, for striking a blow or laying violent hands on a patient, except in the clearest case of necessary self-defence. They are to keep cool under every provocation.

6. They will carefully avoid talking to the patients on the subject of their delusions, nor will they permit others to do so.

7. They will never allow patients to be laughed at, ridiculed, or harshly spoken to.

8. Deception must always be avoided, and no promises are ever to be made, which cannot be unequivocally performed.

9. No attendant will be allowed to trade or barter anything with a patient, nor to receive a present from a patient.

10. Neatness and cleanliness will be most scrupulously required of the attendants, not only in regard to their own appearance, but in the patients and wards under their charge.

11. Attendants are never to allow strangers to enter the wards without the permission of the Superintendent.



12. Visiting of attendants from one ward to another, except when called necessarily, is not permitted.

13. Each attendant is responsible for every patient under his or her care, and is expected to be able at any moment to say where such patient may be found.

14. They shall exercise the greatest vigilance so that while the patients may consider themselves at perfect liberty, they shall be continually under the eye of the attendant in the day rooms, galleries, airing courts, or grounds.

15. Patients suspected or known to have a propensity to suicide, escape, or destructiveness, should never be lost sight of, and all dangerous weapons must be carefully kept out of reach.

16. Attendants are not to retire to their rooms while the patients are in the wards.

17. No person should pass through the wards, nor any door be unlocked, without immediately attracting the attention and occasioning the appearance of an attendant.

18. The patients are to be washed and properly dressed before breakfast, and are to be kept neat and tidy during the day.

19. All are to be bathed regularly once a week, unless directions are given to the contrary. Baths should not be taken directly after a meal—two hours at least should intervene.

20. When the patients are at their meals it is the duty of the attendants to be constantly with them—to distribute the food and to prevent improprieties. Knives and forks must be counted after each meal.

21. Indisposition, refusal of food or medicine, any unusual conduct or appearance, or any suspicious occurrence, should be reported without delay.

22. Whenever a patient escapes, or is missing, immediate notice is to be given by the attendant in charge, and by any other person to whom the fact is known. Each attendant is to aid the others in watching suspected patients.

23. When the patients are out for exercise they are not to be left alone; constant attention is to be given that they do not lie on the ground, or expose themselves to the cold in winter, or to the sun's rays in hot weather.

24. Attendants when in charge of patients at work, shall on all occasions take a part in the labor, and encourage them to diligence and industry by their own good example.

25. Attendants will not be allowed in the kitchen or laundry.



26. Attendants are not to leave the Hospital without permission, and while absent their keys are to be left in the surgery. It will be their duty to report themselves immediately on their return to the premises.

27. Each attendant is to keep a report book for recording the temperature of the ward, and all note-worthy occurrences. A requisition book and damage book are also to be kept, showing the requirements of the ward, and the injuries done to clothing, furniture, &c. An inventory of the patient's clothing is also to be kept, and of the ward equipments.

### OTHER EMPLOYEES.

Those in the service of the Institution, whose duties have not been specially defined in the foregoing rules, shall each perform the services usually appertaining to the designation of his or her employment, according to the instructions of the Superintendent, and of the resident officers under his directions. They will be selected with reference to their fitness for the companionship and oversight of patients while at work out of the wards, and shall conform to the general spirit of these regulations in the performance of their various duties. Whenever the Hospital does not longer require the services of any individual in its employ, the reason for dispensing with them may or may not be given, at the discretion of the Medical Superintendent and Commissioner of Mines and Works.

### OBLIGATION.

*To be signed in the presence of the Medical Superintendent by each Attendant and Servant before appointment :*

I hereby promise to obey the rules of the Hospital, to be careful of its property, and to avoid gossiping about its inmates or affairs. I consider myself bound to perform any duty assigned to me by the Medical Superintendent.

If anything contrary to the rules of the Hospital be done in my presence, or come within my knowledge, I pledge myself to report it to the Medical Superintendent.

I understand my engagement to be monthly, and I agree to give a month's notice in writing, should I wish to leave my situation.



I acknowledge the right of the Medical Superintendent and the Chief Commissioner of Mines and Works to discharge me without warning, for acts of harshness or violence to the patients, for intemperance, or disobedience of orders.

### GENERAL ORDERS.

A. Every person receiving a salary or wages from the Hospital, for any service, shall devote the whole of his or her time to the Institution, and shall inform the Commissioners of the Hospital and Medical Superintendent of every violation of the Bye-laws, rules and regulations of the Hospital, which may come to his or her knowledge. They shall not leave the Hospital without the consent of the Medical Superintendent, and shall note in a book kept for that purpose in the office, the date and hour they leave and the time of their return. They shall not be interested in any purchase or sale to which the Hospital, or a patient, is a party, nor receive any present from a patient.

B. All employees of the institution, except those engaged in night watching, shall commence their duties at 5 o'clock, A.M., in April, May, June, July, August and September; at half-past 5 in March, and October; and at 6 in November, December, January and February.

Breakfast shall commence an hour after the time named above; dinner shall be served at 12 o'clock, and tea at half-past 5, during the year.

The Hospital shall be closed at half-past 9 every night, at which time all shall retire to their apartments.

C. Sunday shall be strictly observed as a day of rest and quiet at the Hospital. No visitors will be admitted, nor will leave of absence be granted on the Lord's day, except to those who are desirous of attending public worship, and can be spared to do so.

D. All persons employed in or about the Hospital, unless they have conscientious objections to the contrary, are ex-



pected, when their duties will admit of it, to attend the religious services held in the Hospital on Sabbath afternoons.

E. In case of serious bodily illness, every patient (unless it be manifestly prejudicial) may be visited by a clergyman of the denomination to which they belong.

F. If a patient escape through negligence, the whole expense of retaking such patient will be deducted from the wages of the person or persons at fault,

G. The admission of visitors to, or their exclusion from, the amusements or occupations of the patients, within the house or grounds, or elsewhere, shall be regulated by the Superintendent alone.

H. No visitor shall be admitted to the Hospital, or any portion of the premises, (private dwellings excepted of course,) after 5 o'clock, P. M., without the sanction of the Superintendent.

I. No officer, attendant, or servant, shall report abroad the name, history, conduct, or conversation of any of the patients, nor shall these be spoken of to visitors; neither shall any who are employed in or about the Hospital visit the friends of patients, without the express permission of the Superintendent.

J. No conversation shall be held through the windows, doors, fences, or dumb-waiters, nor shall anything be thus thrown away.

K. No letters, parcels, or publications, are to be distributed to the patients unless under the direction of the Medical Superintendent, who will inspect all letters to, as well as from patients, and is empowered to withhold the same in whole or in part.

L. The wards occupied by female patients shall not be visited by any of the male employees, nor shall the female attendants or servants visit any portion of the building or premises appropriated to males, without special leave of the Superintendent.

M. Those having charge of keys must be particularly careful to report to the Supervisor whenever any door locks or unlocks, with difficulty. None who are entrusted with keys shall ever part with them to a patient, nor (except when authorized) to any other person, and whenever absent



from duty their keys must be left in the Surgery till their return.

N. Every time leave of absence is granted it shall be reported, and the duration noted. No unmarried attendant or servant is to be permitted to pass the night out of the Hospital.

O. No non-resident shall remain in the Institution over night without the knowledge of the Superintendent.

P. All persons employed in or about the Hospital are expected to treat with becoming civility those engaged in the same service, and no one will be employed who is known to be addicted to intemperance, or any immoral habits.

*Adopted and Approved* }  
*April 27, 1869.* }





from duty their keys must be left in the Surgery till they return. Ladies on business out of the Hospital are not to be admitted.

N. Every time leave of absence is granted it shall be reported, and the duration noted. No unexcused absence of seven days is to be permitted to pass the night out of the Hospital.

O. No non-resident shall remain in the Institution overnight without the knowledge of the Superintendent.

P. All persons employed in or about the Hospital are expected to treat with becoming civility those engaged in the same service, and no one will be employed who is known to be addicted to intemperance, or any immoral habits.

II. The Board of Trustees of the Hospital, do hereby certify that the following is a copy of the original of the Report of the Superintendent of the Hospital, for the year ending April 30, 1860.

The Hospital was opened on the 1st of January, 1859, and during the year ending April 30, 1860, the following number of patients were admitted, and the following number discharged, and the following number died, and the following number were cured, and the following number were still in the Hospital on the 30th of April, 1860.

The total number of patients admitted during the year ending April 30, 1860, was 1,234, and the total number discharged was 1,098, and the total number died was 145, and the total number cured was 1,053, and the total number still in the Hospital on the 30th of April, 1860, was 131.

The total number of patients admitted during the year ending April 30, 1859, was 1,123, and the total number discharged was 987, and the total number died was 134, and the total number cured was 853, and the total number still in the Hospital on the 30th of April, 1859, was 149.

The total number of patients admitted during the year ending April 30, 1858, was 1,012, and the total number discharged was 876, and the total number died was 123, and the total number cured was 753, and the total number still in the Hospital on the 30th of April, 1858, was 160.

The total number of patients admitted during the year ending April 30, 1857, was 901, and the total number discharged was 765, and the total number died was 112, and the total number cured was 641, and the total number still in the Hospital on the 30th of April, 1857, was 144.



