

Annual report : 1902 / Bellevue and Allied Hospitals.

Contributors

Bellevue and Allied Hospitals.

Publication/Creation

New York, N.Y. : [Bellevue and Allied Hospitals], Martin B. Brown) 1902

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Bellevue and Allied Hospitals,

CITY OF NEW YORK.

FIRST ANNUAL REPORT,

1902.



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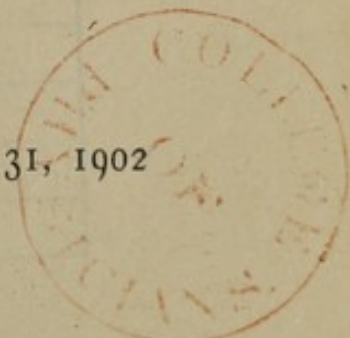
BELLEVUE AND ALLIED HOSPITALS

CITY OF NEW YORK



FIRST ANNUAL REPORT

January 1, 1902, to December 31, 1902



NEW YORK:
MARTIN B. BROWN CO., PRINTERS AND STATIONERS,
Nos. 49 TO 57 PARK PLACE.

1903.



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EXTRACT FROM THE
CHARTER OF THE CITY OF NEW YORK
ESTABLISHING
THE DEPARTMENT OF BELLEVUE AND
ALLIED HOSPITALS.

CHAPTER XIII.

TITLE 2.

BELLEVUE AND ALLIED HOSPITALS IN THE
CITY OF NEW YORK.

BOARD OF TRUSTEES, JURISDICTION, POWERS AND DUTIES.

Sec. 692. 1. On the first day of February, nineteen hundred and two, the jurisdiction of the department of public charities of The City of New York over Bellevue Hospital and the Fordham, Harlem and Gouverneur Hospitals and the Emergency Hospital in East Twenty-sixth street in The City of New York, shall cease, and the care, management and control of such hospitals shall be vested in a board of trustees, which shall on said date succeed to all rights, duties and powers heretofore vested in said department of public charities so far as concerns said hospitals. Said board of trustees shall consist of seven residents of The City of New York, together with the commissioner of public charities, ex-officio. It shall be known as the "Board of Trustees of Bellevue and Allied Hospitals." In the month of January, nineteen hundred and two, the mayor of The City of New York shall appoint one resident of The City of New York to serve as such trustee for the term of one year, one for the term of two years, one for the term of three

years, one for the term of four years, one for the term of five years, one for the term of six years and one for the term of seven years, from the first day of February, nineteen hundred and two. In the month of January, and on or before the twentieth day thereof, prior to the expiration of the term of office of any trustee, the mayor shall appoint his successor for the full term of seven years. The mayor shall fill any vacancy in the board caused by the death of a trustee, his resignation, removal from the city or otherwise, by the appointment of a trustee to hold office for the unexpired term. Every person appointed to serve as such trustee shall, before entering upon the duties of his office, take and subscribe the oath of office prescribed by the constitution of the state.

2. For the purpose of making the appointments aforesaid, the said mayor shall call upon the president or other executive head of each of the following organizations, to wit: The United Hebrew Charities of The City of New York, the Particular Council of New York of the Society of St. Vincent de Paul in New York, and the New York Association for Improving the Condition of the Poor, to present a list of not less than twice the number of persons to be appointed members of said board of trustees, to fill a vacancy or otherwise. Notice in writing of the dates on which appointments, including the first, to said board of trustees are proposed to be made shall be given by the mayor to each of said presidents or other executive heads at least ten days prior thereto, and such list of names shall be so presented within three days after the receipt of such notice. Said presidents or other executive heads may each submit, or two or more of them may jointly present, such a list of names. Appointments to said board of trustees may, in the discretion of the mayor, be made from such list or lists.

3. No trustee shall be subject to removal under the provisions of section ninety-five of this act, but any trustee may

be removed by the mayor upon proof either of official misconduct or neglect of duty or of conduct which tends to discredit his office or for mental or physical inability to perform his duties, but before such removal he shall receive due and timely notice in writing of the charges and a copy thereof, and shall be entitled to a hearing on like notice before the mayor and to the assistance of counsel on said hearing. No trustee shall receive pecuniary compensation for his services or be interested directly or indirectly in the furnishing or performing of work, labor, services, materials or supplies of any kind to or for said hospitals by contract or otherwise. No trustee shall hold any office of emolument under the city, county, state or national government, except the offices of notary public, or commissioner of deeds, or offices in the national guard.

4. The commissioners of the sinking fund of The City of New York shall within thirty days after the passage of this act prepare a plan for the separation from the department of public charities of the said Bellevue Hospital, and the Fordham, Harlem, Gouverneur and Emergency Hospitals. Such plan shall apportion to each of said hospitals the lands, buildings, fixtures, furniture and other appurtenances and property, and the books, records, vouchers and other papers hitherto used in connection with or for the purposes of said hospitals, and provide in detail for the transfer thereof to said board of trustees of Bellevue and allied hospitals on the first day of February, nineteen hundred and two. It shall further apportion to each of said hospitals, the employees and subordinates of every grade in the service of the department of public charities who shall be in service in and about the said hospitals exclusively on said date. To enable said commissioners to prepare such plan, they shall have access to all of the books and papers which are the property of The City of New York in the custody of said department of public charities, and to visit said hospitals, and

to require at any and all times the attendance before them of the commissioner of public charities and of any of his employees and subordinates.

5. Said board of trustees shall organize within ten days after said trustees are appointed. It shall annually choose from its members, at a regular meeting to be held in the month of February, a president and a secretary for the term of one year. It shall establish rules and regulations for the administration and government of said hospitals. It shall administer the moneys appropriated for said hospitals, subject to the general provisions of this act relative to the audit and payment of claims. Said board shall have power to appoint and at pleasure remove such superintendents, medical officers, subordinate officers and other employees as may be necessary for the efficient management and conduct of said hospitals, subject to the civil service laws and the rules and regulations of the municipal civil service commission. The board of trustees shall keep accurate and detailed accounts, in a form approved by the comptroller, of all moneys received and expended by it, the sources from which they are received and the purposes for which they are expended. It shall during the month of January in each year transmit to the mayor a report as to the condition of the hospitals under its care and the management thereof during the year ending the preceding thirty-first day of December.

6. The medical board of Bellevue Hospital, and allied hospitals, shall be composed of the attending and consulting physicians and surgeons of said hospitals on the first day of February, nineteen hundred and two. They and such successors as the board of trustees may appoint shall serve without pecuniary compensation, and shall hold office so long as they shall perform their duties in a manner satisfactory to the said board of trustees. Vacancies occurring in said medical board

shall be filled by the said board of trustees by appointment from the medical profession in The City of New York. The said board of trustees shall, on nomination of the said medical board, appoint medical and surgical house officers to the said hospitals, all of whom shall serve without pecuniary compensation.

7. Any person injured or taken sick in the streets or in any public square or place within The City of New York, who may not be safely removed to his or her home, may be sent to and shall be received by the said hospitals for temporary care and treatment, irrespective of his or her place of residence. The said board of trustees shall provide and maintain suitable rooms or wards for the reception, medical examination and temporary care of persons alleged to be insane.

8. The said board of trustees may permit the reception and treatment in said hospitals of persons who do not reside in The City of New York, provided that every person so receiving treatment shall be required to pay such sum for board and attendance as may be fixed by said board of trustees, and provided that no such person shall be received to the exclusion of patients who reside in said city. The said board of trustees shall collect and pay over all such moneys to the chamberlain once every month, and the amount so collected shall be paid into the general fund. The said board of trustees shall, upon making such payments to the chamberlain, report the same to the comptroller of The City of New York.

9. The board of estimate and apportionment and the board of aldermen shall in each year appropriate such sum as in their judgment may be necessary for the support and maintenance of said hospitals. It shall be the duty of the board of trustees thereof to send to the board of estimate and apportionment, on or before the first day of September in each year, an estimate in writing of the sum needed for the ensuing year in the same manner and general form as the heads of departments and other boards of The City of New York are required to furnish.

10. Whenever any sick person in Bellevue or other hospitals hereinbefore mentioned shall, in the judgment of the board of trustees, cease to be a proper case for treatment therein, said board may cause such person to be transferred to the care, custody and control of the commissioner of public charities, who shall forthwith receive and care for such person. In case any sick person under treatment in any of said hospitals shall die while under the care of the board of trustees, the latter, by their properly designated officer or employee, may call upon the commissioner of public charities forthwith to receive and remove the body of such person, and it shall thereupon be the duty of such commissioner forthwith to receive and remove the same for burial or other proper disposition. The cost and expense of such reception, removal, burial or other proper disposition shall be borne and paid by the department of public charities.

BOARD OF TRUSTEES.

JOHN W. BRANNAN, M. D., *President.*

JAMES K. PAULDING, *Secretary.*

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SAMUEL SACHS.

MARCUS STINE.

THEODORE E. TACK.

HOWARD TOWNSEND.

HOMER FOLKS, *ex-officio.*

BELLEVUE HOSPITAL.

MEDICAL BOARD.

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 FRANK W. JACKSON, M. D., Vice-President.
 ALEXANDER LAMBERT, M. D., Secretary.

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EDWARD L. KEYES, M. D.,	JOHN W. S. GOULEY, M. D.,
LEWIS A. STIMSON, M. D.	

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CHARLES L. DANA, M. D.,	FRANK W. JACKSON, M. D.,
GEORGE B. FOWLER, M. D.,	CHARLES E. NAMMACK, M. D.,
HENRY P. LOOMIS, M. D.,	EGBERT LEFEVRE, M. D.,
HERMANN M. BIGGS, M. D.,	GEORGE R. LOCKWOOD, JR., M. D.,
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W. GILMAN THOMPSON, M. D.,	VAN HORN NORRIE, M. D.

Visiting Surgeons.

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WILLIAM F. FLUHRER, M. D.,	CHARLES H. CHETWOOD, M. D.,
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BERN B. GALLAUDET, M. D.,	GEORGE D. STEWART, M. D.
GEORGE WOOLSEY, M. D.,	JOHN B. WALKER, M. D.

Visiting Gynecologists.

WILLIAM M. POLK, M. D., HENRY C. COE, M. D.,
W. GILL WYLIE, M. D.

Visiting Genito-Urinary Surgeons.

ROBERT W. TAYLOR, M. D., SAMUEL ALEXANDER, M. D.,
L. BOLTON BANGS, M. D.

Assistant Visiting Physicians.

EDMUND LEROY DOW., M. D., ROBERT J. CARLISLE, M. D.,
WARREN COLEMAN, M. D., CYRUS J. STRONG, M. D.

Assistant Visiting Surgeons.

LUCIUS W. HOTCHKISS, M. D., WILLIAM C. LUSK, M. D.,
BENJAMIN T. TILTON, M. D., THOMAS A. SMITH, M. D.

Assistant Visiting Gynecologists.

CHARLES C. BARROWS, M. D., WILLIAM E. STUDDIFORD, M. D.,
ROBERT H. WYLIE, M. D.

Assistant Visiting Genito-Urinary Surgeons.

JAMES R. HAYDEN, M. D., F. CRUGER EDGERTON, M. D.,
JAMES PEDERSEN, M. D.

HOUSE STAFF.

First Medical Division.

(For six months ending June 30, 1902.)

H. A. CASSABEER, M. D., House Phys., L. H. SHEARER, M. D., Junior,
R. BYINGTON, M. D., Senior Ass't, O. T. HYDE, M. D., Sub Junior.

(For six months ending December 31, 1902.)

R. BYINGTON, M. D., House Phys., O. T. HYDE, M. D., Junior,
L. H. SHEARER, M. D., Senior Ass't, E. P. WARREN, M. D., Sub Junior.

Second Medical Division.

(For six months ending June 30, 1902.)

C. BUCK, M. D., House Gyn., E. GOOD, M. D., Externe (resigned),
 E. HAND, M. D., House Phys., D. D. WILCOX, M. D., Externe,
 M. L. FLEMING, M. D., Senior Ass't, G. PAYNE, M. D. (resigned),
 J. H. McLEAN, M. D., Senior Ass't, L. S. WATSON, M. D., Externe.

(For six months ending December 31, 1902.)

E. HAND, M. D., House Gyn., W. L. NILES, M. D., Senior Ass't,
 M. L. FLEMING, M. D., House Phys., W. WILSON, M. D., Junior,
 J. H. McLEAN, M. D., Senior Ass't, R. M. VOSE, M. D., Sub Junior.

Third Medical Division.

(For six months ending June 30, 1902.)

A. G. KEANE, M. D., House Phys., L. H. COGSWELL, M. D., Junior,
 G. H. BLAKESLEE, M. D., Senior Ass't, C. HECKEL, M. D., Externe.

(For six months ending December 31, 1902.)

G. H. BLAKESLEE, M. D., House Phys., W. B. MORRIS, M. D., Junior,
 L. H. COGSWELL, M. D., Senior Ass't, J. J. BURNS, M. D., Sub Junior,
 W. F. PLUMLEY, M. D., Sub Junior.

Fourth Medical Division.

(For six months ending June 30, 1902.)

T. J. ABBOTT, M. D., House Phys., C. GILLETTE, M. D., Senior Ass't,
 J. T. GORTON, M. D., House Gyn., W. B. JONES, M. D., Junior.

(For six months ending December 31, 1902.)

J. T. GORTON, M. D., House Phys., W. B. JONES, M. D., Senior Ass't,
 C. GILLETTE, M. D., House Gyn., F. W. PYLE, M. D., Junior.

First Surgical Division.

(For six months ending June 30, 1902.)

G. H. COCHRAN, M. D., House Surg., J. F. MCCARTHY, M. D., Junior Ass't,
 J. K. TRAIN, M. D., Senior Ass't, H. FOEHRENBACH, M. D., Amb. Surg.,
 J. SINCLAIR, M. D., Externe.

(For six months ending December 31, 1902.)

J. K. TRAIN, M. D., House Surgeon, H. FOEHRENBACH, M. D., Jun'r Ass't,
 J. F. MCCARTHY, M. D., Senior Ass't, C. FRINK, M. D., Junior,
 B. MOORE, M. D., Sub Junior.

Second Surgical Division.

(For six months ending June 30, 1902.)

M. J. SULLIVAN, M. D., House Surg., J. L. ORR, JR., M. D., Junior,
 C. CLARK, M. D., Senior Ass't, P. H. WILLIAMS, M. D., Amb. Surg.,
 J. KEENAN, M. D., Externe.

(For six months ending December 31, 1902.)

C. CLARK, M. D., House Surg., P. H. WILLIAMS, M. D., Junior,
 J. L. ORR, JR., M. D., Senior Ass't, E. MILTIMORE, M. D., Junior,
 M. A. LOSEE, M. D., Junior.

Third Surgical Division.

(For six months ending June 30, 1902.)

L. G. VOIGHT, M. D., House Surg., H. H. HALLIWELL, M. D., Junior,
 A. W. LOVE, M. D., Senior Ass't, A. JONES, M. D., Amb. Surgeon,
 J. K. S. HALL, M. D., Externe.

(For six months ending December 31, 1902.)

A. W. LOVE, M. D., House Surgeon, L. D. ALEXANDER, M. D., Junior,
 H. H. HALLIWELL, M. D., Sen'r Ass't, V. FREDERICKSON, M. D., Junior,
 A. HOGAN, M. D., Sub Junior.

Fourth Surgical Division.

(For six months ending June 30, 1902.)

J. H. POTTER, M. D., House Surgeon, A. S. MORROW, M. D., Junior,
 E. L. CASH, M. D., Senior Ass't, J. M. SPETNAGEL, Sub Junior.

(For six months ending December 31, 1902.)

E. L. CASH, M. D., House Surgeon, J. M. SPETNAGEL, Junior,
 A. S. MORROW, M. D., Senior, D. S. McDONALD, M. D., Sub Junior.

EXECUTIVE STAFF.

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 M. J. RICKARD, Assistant Superintendent.
 JOHN F. McHALE, Night Assistant Superintendent.

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FLAVIUS PACKER, M. D., Resident Physician.
 MENAS S. GREGORY, M. D., First Assistant Resident Physician.
 DEWITT C. MACCLYMONT, M. D., Second Assistant Resident Physician.

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 CARRIE J. BRINK, . First Assistant, Training School for Women Nurses.
 DR. LUCY A. BANNISTER, First Assistant, Training School for Men Nurses.
 MARY A. CLARK, . Second Assistant, Training School for Women Nurses.
 ARTHUR S. LITTLE, . Second Assistant, Training School for Men Nurses.

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 FRANK ECKSTEIN, Contract Clerk and Auditor.
 J. P. FAWCETT, Bookkeeper.
 E. P. SOUTHWELL, Chaplain.
 HENRY C. DYER, Chaplain.
 EDWARD K. STONE, Chaplain.

GOUVERNEUR HOSPITAL.

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EDWARD WAITZFELDER, M. D.,
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HENRY M. SILVER, M. D., JOHN F. ERDMANN, M. D.,
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 JOHN ROGERS, M. D., JAMES E. KELLY, M. D.

JESSIE A. STOWERS,
 Supervising Nurse.

HOUSE STAFF.

(For three months ending March 31, 1902.)

J. WEINBERG, M. D., House Phys., W. H. SMITH, M. D., House Surg.,
 H. T. WILLIAMS, M. D., Sen'r Phys., B. J. GRETSCH, M. D., Senior Surg.,
 W. H. WHITMAN, M. D., Jun'r Phys., B. L. SCHAEFFER, M. D., Jun'r Surg.,
 F. G. GOODRIDGE, M. D., Sub Junior. R. F. McDONALD, M. D., Sub Junior.

(For three months ending June 30, 1902.)

W. H. SMITH, M. D., House Phys., J. WEINBERG, M. D., House Surgeon,
 B. J. GRETSCH, M. D., Senior Phys., H. T. WILLIAMS, M. D., Sen'r Surg.,
 B. L. SCHAEFFER, M. D., Junior Phys., W. H. WHITMAN, M. D., Jun'r Surg.,
 R. F. McDONALD, M. D., Sub Jr. Phys. F. G. GOODRIDGE, M. D., Sub Junior.

(For three months ending September 30, 1902.)

B. J. GRETSCH, M. D., House Phys., H. T. WILLIAMS, M. D., House Surg.,
 B. L. SCHAEFFER, M. D., Sen'r Phys., W. H. WHITMAN, M. D., Sen'r Surg.,
 R. F. McDONALD, M. D., Jun'r Phys., F. G. GOODRIDGE, M. D., Junior Surg.,
 P. W. MONROE, M. D., Sub Jr. Phys. C. C. HARROLD, M. D., Sub Junior.

(For three months ending December 31, 1902.)

H. T. WILLIAMS, M. D., House Phys., B. J. GRETSCH, M. D., House Surg.,
 W. H. WHITMAN, M. D., Sen'r Phys., B. L. SCHAEFFER, M. D., Sen'r Surg.,
 F. G. GOODRIDGE, M. D., Junior Phys., R. F. McDONALD, M. D., Jun'r Surg.,
 C. C. HARROLD, M. D., Junior Phys. P. W. MONROE, M. D., Sub Jr. Surg.

HARLEM HOSPITAL.

MEDICAL BOARD.

RICHARD VAN SANTVOORD, M. D.,
 President.

JOHN J. McGRATH, M. D.,
 Secretary.

Visiting Physicians.

RICHARD VAN SANTVOORD, M. D.,	THEODORE KEUNE, M. D.,
SAMUEL J. MELTZER, M. D.,	RICHARD G. WIENER, M. D.,
J. T. JOSEPH BIRD, M. D.,	LOUIS K. NEFF, M. D.

Visiting Surgeons.

HERMAN A. HAUBOLD, M. D.,	THOMAS H. MANLEY, M. D.,
IRVING S. HAYNES, M. D.,	JOHN J. McGRATH, M. D.,
A. PALMER DUDLEY, M. D.,	WILLIAM H. LUCKETT, M. D.

Special Consultants.

J. CLARENCE SHARP, M. D.,	Laryngologist.
GEORGE B. McAULIFFE, M. D.,	Ophthalmologist.
WILLIAM M. LESZYNSKY, M. D.,	Neurologist.
HERMAN JARECKY, M. D.,	Otologist.

Assistant Visiting Surgeons.

JOHN J. MOORHEAD, M. D.,	GEORGE H. MALLETT, M. D.
--------------------------	--------------------------

SARAH A. GAINSFORTH,
Supervising Nurse.

HOUSE STAFF.

FROM DECEMBER 1, 1901, TO JUNE 1, 1902.

L. M. MOONEY, M. D.,	House Physician and Surgeon.
W. T. BIVINGS, M. D.,	Senior Physician and Surgeon.
J. J. SLEVIN, M. D.,	Ambulance Call Duty.
G. J. GREIL, M. D.,	Junior Physician and Surgeon.

Externe for One Year.

H. S. CANBY, M. D., from June 1, 1901, to June 2, 1902.

FROM JUNE 1, 1902, TO DECEMBER 1, 1902.

W. T. BIVINGS, M. D.,	House Physician and Surgeon.
J. J. SLEVIN, M. D.,	Senior Physician and Surgeon.
G. J. GREIL, M. D.,	Ambulance Call Duty.
J. J. DONOVAN, M. D.,	Junior Physician and Surgeon.

Externe for One Year.

PARKS M. KING, M. D., from June 1, 1902.

Transferred to one year interne service on July 1, 1902.

FORDHAM HOSPITAL.

MEDICAL BOARD.

JOHN H. EDEN, M. D.,
President.

THOMAS JOSEPH DUNN, M. D.,
Secretary.

Visiting Physicians.

JOHN H. EDEN, M. D., JOHN RIEGELMAN, M. D.,
THOMAS JOSEPH DUNN, M. D., *EDWARD F. HURD, M. D.,
 THOMAS F. MAGUIRE, M. D.

*Resigned, August, 1902.

Visiting Surgeons.

JOHN J. QUIGLEY, M. D., JACKSON R. CAMPBELL, M. D.,
JOSEPH J. HIGGINS, M. D., CHARLES T. BELL, M. D.,
 JAMES A. FERGUSON, M. D.

CARRIE GRAY,
Supervising Nurse.

HOUSE STAFF.

From January 1, 1902, to January 31, 1902.

K. THETFORD, M. D.,	.	.	.	.	.	House Surgeon.
W. C. MONTGOMERY, M. D.,	.	.	.	.	.	Senior Surgeon.
W. H. CANTLE, M. D.,	.	.	.	.	.	Ambulance Surgeon.
J. J. WALSH, M. D.,	.	.	.	.	.	Junior Surgeon.

From February 1, 1902, to May 31, 1902.

W. C. MONTGOMERY, M. D.,	.	.	.	.	.	House Surgeon.
W. H. CANTLE, M. D.,	.	.	.	.	.	Senior Surgeon.
J. J. WALSH, M. D.,	.	.	.	.	.	Ambulance Surgeon.
P. J. VETTER, M. D.,	.	.	.	.	.	Junior Surgeon.

From June 1, 1902, to December 31, 1902.

W. H. CANTLE, M. D., House Surgeon.

P. J. VETTER, M. D., Ambulance Surgeon.

Advanced to Senior, July 31, 1902.

A. T. KINGSTON, M. D. Junior Surgeon.

Advanced to Ambulance, July 31, 1902.

H. P. O'NEILL, M. D., Junior Surgeon.

July 31, 1902.

REPORT OF BOARD OF TRUSTEES.

NEW YORK, January 1, 1903.

Hon. SETH LOW, Mayor, City of New York:

SIR—In accordance with the provisions of the Charter of the City of New York, the Trustees of Bellevue and Allied Hospitals have the honor to submit herewith their Report for the year ending on December 31, 1902. As the Trustees assumed office on the 1st day of February, 1902, the present Report covers eleven months' administration instead of the full year contemplated by the Charter.

THE DEPARTMENT AS A WHOLE.

The section of the Charter separating Bellevue and its associated hospitals from the Department of Public Charities created a new Department of the City Government. In order to bring the positions of the principal officials into conformity with the changed conditions, the Trustees adopted a resolution placing the Superintendent in charge of the Department, and he was at the same time instructed to draw up a set of regulations defining the duties of his subordinates. Under these rules the positions of Auditor and Bookkeeper, Purchasing Agent and General Storekeeper, and Supervising Engineer, were attached to the office of the Superintendent, the duties of these officers connecting them with the Department as a whole. The storeroom, formerly used exclusively for Bellevue supplies, was made a storeroom for the Department generally—a central bureau of supplies—and a separate storeroom for Bellevue was provided elsewhere. The Supervising Engineer was put in charge of the

heating and lighting apparatus and of general repairs, and the employees concerned with this branch of the work—engineers, painters, carpenters, plumbers, etc.—were placed under his direct control. A special bookkeeper and an additional stenographer for the Department of Supplies were employed, and an extra clerk for the office of the Supervising Engineer.

The most important change affecting this Department as a whole, since the Trustees took office, has been that in the superintendency. Early in November Dr. George T. Stewart, Superintendent, applied for permission to take a trip to Europe for the benefit of his health, and, upon his return, an application having been made by the Board of Health for his transfer to that Department, the Trustees, at his own request, granted this application, and he ceased to be in the employ of this Department. In filling the vacancy thus created the aim of the Trustees was to find a man of the highest professional attainments, fitted alike by nature and training for the arduous duties and exacting requirements attaching to the position of Superintendent of Bellevue and Allied Hospitals. Such a man the Board believes it has secured in Dr. William Mabon, Superintendent of the St. Lawrence State Hospital for the Insane, at Ogdensburg, N. Y.

Dr. Mabon is a graduate of the Bellevue Hospital Medical College of the class of 1881. His first State appointment was to the position of Assistant Physician at the Utica State Hospital for the Insane. Here he remained until 1895, when he was appointed Medical Superintendent of the Willard State Hospital, then badly in need of reorganization. A single year sufficed him to put this institution upon a firm basis, and in 1896 he accepted the call of the managers of the St. Lawrence State Hospital at Ogdensburg, where his predecessor had been Dr. Wise, just then appointed President of the State Commission in Lunacy. The reputation of this institution for enlight-

ened treatment of the insane was fully maintained under Dr. Mabon's management, and he demonstrated anew the administrative capacity of which he had already given proof elsewhere. As he was already in the service of the State, Dr. Mabon's appointment was easily effected under the Civil Service Rules, by the consent of the State and Municipal Civil Service Boards to his transfer. In addition to his position as Superintendent of Bellevue and its Allied Hospitals, he will act as Consulting Physician to the Pavilion for the Alleged Insane. He will assume office at the beginning of the coming year.

During the period of Dr. Stewart's absence in Europe the duties of Superintendent were performed in an efficient and acceptable manner by Mr. Michael J. Rickard, Assistant Superintendent, and the Board of Trustees put on record in a resolution its sense of the long and valued services to the institution of this faithful official, who will continue in his present position under the new Superintendent.

AMBULANCE, ADMISSION AND TRANSFER SERVICES.

The most important change made in the medical service of the combined hospitals was that affecting the ambulance and admission regulations in practice in the several institutions. In all cases these important services were attended to by the youngest and newest men on the staff, for the reason, partly, that the service being disagreeable, was not desired by the older men, but willingly imposed as a part of his hard lot upon the newcomer. Add to this that the attending physicians and surgeons naturally prefer the older men, because of their greater experience, to render assistance in the wards and at operations in the hospital, and that ambulance service involves such nearly continuous duty as to render impossible the performance of such assistance within the hospital. It took, therefore, some little time to arrange for the change finally ordered in a resolu-

tion passed by the Board of Trustees on July 22. By this resolution the Medical Boards at the various hospitals were directed to assign ambulance service only to such members of the house staffs as had had at least six months' experience in the hospital. The desirability of having upon the ambulance an experienced man, qualified by some previous training to deal with the delicate and difficult situations that so often confront the young ambulance doctor, seemed to the Trustees to outweigh any other consideration involved.

At the same time the Medical Boards were invited by resolution so to arrange the service of the house staffs that the examination and admission of patients might be done by the house physician or surgeon or by the senior assistant during the day, and at night by the senior or first junior assistant. This, like the change in the ambulance service, is in the direction of putting the work demanding the greatest responsibility upon the more experienced members of the staff, and both changes are expected to result in an improved public service.

In the matter of transfers from any of the hospitals in this Department to the Department of Public Charities, a new rule has been adopted requiring that the patient shall be accompanied by a full personal and clinical history, the first to include such data as date of admission, name, age, nationality, occupation, civil condition, religion, names and addresses of nearest friends or relatives; and the second a statement of the medical treatment afforded the patient and the nature and date of any operation which may have been performed. The private hospitals were requested to give similar information, and, to facilitate this, the Superintendent was instructed to have blank cards prepared upon which such information might be conveniently stated, and to furnish the hospitals with a supply of them.

So, too, it has been provided that in all accident cases a record

shall be made in the patient's history, of the time, place and circumstances in which the injury occurred, and that a statement of these facts shall be required of private hospitals transferring to the hospitals under care of the Trustees. This, it is expected, will have a tendency to facilitate the treatment of such cases, and at the same time will serve as a protection to the hospital authorities against fraudulent claims holding them responsible for the infliction of these injuries.

MEDICAL LIBRARIES.

The Trustees, at their first meeting in October, appropriated \$250 from the supplies account for the purpose of establishing medical libraries in the four hospitals under their care. This sum has been invested in standard medical works, to form the nucleus of a library for each hospital in the Department. Messrs. William Wood & Co. presented the Department with forty-four volumes, and Messrs. Lea Brothers & Co., of Philadelphia, co-operated in the formation of the medical libraries by presenting each hospital with the *Medical News*, weekly, and the *American Journal of Medical Sciences*, monthly. The *Medical Record* and the *American Journal of Obstetrics* have also been provided for the library of each of the four hospitals. All these journals are to be preserved for binding, and will thus become a permanent part of the library equipment. Book plates and call slips have been provided, and it is intended to administer the libraries in accordance with the best principles of library economy.

BELLEVUE HOSPITAL.

In order properly to report upon the improvements effected at Bellevue Hospital under their management, the Trustees deem it necessary to restate, as briefly as the subject will permit, the conditions prevailing there at the time they took office. The

chief evils then complained of were the inadequate facilities for the reception and examination of patients; the overcrowded sleeping-rooms of the house staff; the dark and unwholesome quarters of the employees, which, combined with the low wages paid, rendered it difficult to obtain a satisfactory class of attendants; the indecent conditions in the prison wards; the unsatisfactory methods of cooking and serving the food of the patients; the antiquated and unsanitary character of the plumbing, and the inadequate protection against fire.

Steps have been taken in the direction of remedying nearly all of these evils, but some of them, as pointed out in our Report for the five months ending June 30, 1902, can be removed only by the erection of new buildings in place of those now in use. The main structure, containing 718 of the 939 beds in the whole hospital, was erected in 1817 as an almshouse, and continued to be used for this purpose until 1846, since which time it has served as the principal hospital of New York. All the patients must be received and examined in one room in the basement, poorly lighted and badly ventilated. From 80 to 100 sick people, most of them very poor, apply for admission every day, and all of them—men, women and children—must pass through the same room, there being no other available. Every variety of disease and injury, besides intoxication and insanity, is thus displayed in rapid succession, and transfers must frequently be made to the wards before proper diagnosis can be made. Considerations of quiet and privacy have to be disregarded under such circumstances, and distressing incidents cannot be altogether avoided. All that the Trustees have been able to do in the way of improving conditions here has been to have bath tubs attached to the reception-room, so that patients are no longer carried to the wards unwashed or in clothes perhaps infested with vermin.

HOUSING THE HOUSE STAFF.

Another deficiency due to the original structure of a building never intended for use as a hospital is the insufficient number of rooms available as sleeping quarters for the house staff, there being but 16 rooms for 43 physicians. The duties devolving upon these young men are greater and more complex than in any other hospital in the city. In addition to caring for the patients in the 32 wards of the main hospital, they are responsible for the service in the reception office, the prison wards, the alcoholic pavilion, the erysipelas pavilion, the Emergency lying-in hospital, and finally the regular ambulance service of this large hospital. When they are obliged to sleep three and four, and, as in one case, even five in a room, it is impossible for them to secure the rest needed to fit them for these important duties. The Trustees have been able, from the nature of the case, to do nothing to remedy the overcrowding, but furniture has been bought, rugs placed upon the bare floors and space provided for clothing. The room formerly used by the staff as a dining-room was too small to accommodate more than half their number at one sitting, and the Medical Board room across the hall was accordingly taken for a dining-room, while the anteroom of the Superintendent's quarters on the second floor will be used as a sitting-room for the staff.

THE EMPLOYEES AND THEIR QUARTERS.

The quarters provided for the employees are dark and ill ventilated, the majority of these dormitories being in the basements, under the wards, rarely entered by a ray of sunshine. One dormitory for women is 45 feet long by 36 feet wide, and contains 31 beds, giving 418 cubic feet of air per bed. A smaller room containing 15 beds has but one window. The women have no sitting-room. One Sunday afternoon in March these poor women were found sitting on the edge of their beds,

staring at the floor. One of the first acts of the Trustees was to order chairs for these rooms. Before this the inmates' clothes were left at night in pine boxes under the bed. The men have no smoking or lounging room, and when not at work have nothing to do but loiter about the yard. To remedy this condition, so far, at least, as the women are concerned, the Trustees have prepared plans for converting the old Bellevue Hospital Medical School building into a dormitory for the women employees of the hospital. The building will be fire-proof, and quarters will be provided for about 125 women in well-lighted and ventilated rooms, holding from 5 to 7 beds each. There will be three sitting-rooms, one on each floor, as well as bathroom and toilet conveniences. In the meanwhile the second floor of the old boiler-house, lately used as a carpenter shop, has been repaired and furnished as a temporary dormitory for the women. Most of the other employees' dormitories have been painted, and in some of them the windows have been enlarged.

The wretchedness of the quarters, combined with the poor rate of wages—\$10 a month for the women and \$12.50 for the men—paid to the majority of these employees in the past, has resulted in a class of help untrustworthy and inefficient, as a rule. It has been customary to discharge every month from 40 to 50 per cent. for drunkenness or incompetency, and to fill their places with others equally unfit. The Trustees have protested against a continuance of this system, and the Board of Estimate and Apportionment has been asked to appropriate such a sum as will permit of the payment of living salaries to all employees of the hospital.

THE PRISON WARDS.

The following is a description of the prison wards as they were when the Trustees assumed office :

“ Both wards are in the basement. The men’s ward is about 40 feet long by 20 feet wide and 8 feet high, with windows on only one side, giving about 500 cubic feet of air to each of the thirteen beds, the minimum exacted in the tenement houses by the Board of Health being 600 cubic feet. In addition, it is frequently necessary to place one or more patients upon mattresses on the floor. There is no ventilation except such as is obtained by opening a window, thus bringing a direct draught upon the patients. The water-closet, an old, corroded iron hopper, is in the open ward, screened only on two sides from the patients by a thin board partition about 7 feet high. The table at which the patients eat is within 3 feet of this partition. The ventilation of the closet is into the ward, there being no windows on that side. The air in this room in the afternoon after the gas has been lighted is too foul for description. In the women’s prison ward the water-closet is in the pantry where the cooking utensils are kept. On one of our early visits to this ward a nurse was seen warming milk in the pantry at the same time that a patient was using the closet only a few feet away. As was said by one of the Trustees at the time, it is not right to subject refined women nurses to such surroundings whatever we may think of the prisoners. But the prisoners confined there are not all criminals. Some of them, for instance, are poor unfortunates who have attempted suicide and are detained until they are well enough to be brought to trial.”

Since then an improvement has been effected by the abandonment of the men's prison ward, which has been converted into a linen-room, long a necessity at the hospital. The opportunity for making this change, which went into effect on September 24, was found in the continued low census of the women's prison ward. Their small number made it possible to provide for the women prisoners in a room adjoining the women's alcoholic ward, where they were placed in charge of police officers, this arrangement leaving the women's prison ward available for the use of the male prisoners. The ward has a capacity of ten beds, and the conditions, while still unsatisfactory, are an improvement over those which obtained in the old ward.

KITCHEN AND LAUNDRY.

The kitchen which supplies all the patients and employees is an isolated building 60 feet from the hospital, which had no connecting corridor. The food had to be carried by hand through the open air, winter and summer, into the basement, and then still by hand up the stairs to the various floors and from one end of the hospital to the other. By the time it reached the patients it was cold and uninviting. A door has been cut through the wall of the basement so that food cars may be wheeled directly from the kitchen into the hospital building, and thence through the halls to the different wards. A covered corridor has also been built connecting the kitchen with the main building, and other measures have been taken to provide the patients with good, well-cooked and promptly served food.

A thorough reorganization of the laundry has been accomplished within the last year. The lack of system which prevailed has been replaced by modern methods, and much improvement has resulted. The position of Manager of Laundry has been made, and an incumbent appointed, who is

expected to do the work of a specialist in his line. The unusual amount of work which has to be done for an institution of the size of Bellevue Hospital has made it advisable to make the laundry a separate department. A better class of help, at higher salaries, has been employed, and this has made it possible, by reason of the better quality of the work done, to reduce the number of employees. These formerly numbered from 25 to 30, while at present there are but 22. New machinery is still needed, and when this is obtained it may be possible to make a further reduction.

The conditions above described were such as to be evident to the Board of Trustees on taking charge of the hospital. Soon, however, feeling the need of more expert observation, we called to our aid several of the other departments of the City, namely, the Bureau of Buildings, the Fire Department, the Department of Health, and finally, the New York Board of Fire Underwriters. Their reports follow in the order named, and will be found of interest.

PROTECTION AGAINST FIRE.

On the 26th of February, the Superintendent of Buildings made a special investigation of all the hospitals in this Department, "to determine whether the conditions were such as to give rise to danger from fire or other causes, and whether suitable and sufficient means of exit were provided in case of fire." He submitted a report showing numerous serious violations of the Building Code, especially in Bellevue and the Emergency Hospitals. In Bellevue Hospital it was found that the shaft walls of the elevator in the centre of the main building, the only elevator in the hospital, were composed of stud, lath and plaster, and it was ordered that these inflammable materials be at once removed and replaced with brick or other fireproof material. The main stairway of the hospital was in the same unsafe con-

dition. Self-closing fireproof doors were lacking in the halls and at the landings of the stairways. In many parts of the hospital there were no fire escapes or other means for the escape of patients or attendants in case of fire.

The Emergency Hospital, devoted to the care of maternity cases and always containing about twenty mothers, babies and nurses, was entirely unprovided with fire escapes, though the building is a very old non-fireproof structure.

The changes ordered by the Bureau of Buildings have all been carried out, at a cost of about \$10,000, and Bellevue Hospital is now probably as safe against fire as the old hospital can be made with any reasonable expenditure of money.

On the 28th of February the Fire Commissioner was requested to order a special inspection of the apparatus provided in the various hospitals for extinguishing fires. He was also asked to detail an officer of the Fire Department to organize the employees of Bellevue Hospital into a fire brigade, with provision for systematic drill at stated intervals, and, if possible, to detail a fireman for permanent duty at the hospital. In compliance with these requests, an inspection was made of all the hospitals, and the employees were instructed in the use of the fire appliances. Gouverneur, Harlem and Fordham Hospitals were reported as well equipped with the means of extinguishing fires, needing only additional axes, fire-hooks and lengths of hose. The report relative to Bellevue Hospital, however, after recommending stand-pipes, axes, hooks, fire extinguishers and hose for the different buildings of the hospital, closes as follows:

"I would also recommend every length of hose be taken out of all buildings and replaced by hose of the Fire Department standard, as the hose which is now in use is of light linen material, and, in my opinion, would stand very little pressure.

" Would also recommend that telegraph system now in use be thoroughly overhauled, for, as near as I can learn, fire has occurred in some parts of the building, and system did not work properly. Would also recommend all wooden platforms in fire escapes be removed and replaced with iron ones.

" It seems that there is no fireproof material in any part of main building, and, should a fire occur that could not be extinguished by employees before the arrival of the Department, in my opinion the whole building would be in flames and there would be great loss of life, as it seems to me to be one of the most dangerous buildings in case of fire I have ever inspected.

Respectfully,

GEORGE L. ROSS,
*Chief, Eighth Battalion, Fire Department,
City of New York."*

The requirements of the Fire Department have been complied with. The hose in the various buildings of the hospital was tested, and all that failed to withstand a pressure of 100 pounds has been replaced by hose of the Fire Department standard. A new system of fire alarm indicators has been installed and connected with all the buildings in the hospital grounds. The employees in the different services have been organized into a fire brigade and are drilled at frequent intervals in the use of the fire apparatus. Twenty-four men from the working force were selected and divided into day and night squads, and an arrangement of details effected by which the hospital is guarded at all times by a force of not less than sixteen men. The other recommendations of the Fire Department are covered by the alterations ordered by the Bureau of Buildings.

THE SANITARY CONDITION OF BELLEVUE HOSPITAL.

On the 8th of April the Department of Health was requested to inspect Bellevue Hospital and to report on its sanitary condition. The inspection was promptly made, and its thoroughness is attested by the following report, which, in view of its importance, we have submitted in full:

REPORT OF THE DEPARTMENT OF HEALTH ON THE
SANITARY CONDITION OF BELLEVUE HOSPITAL.

MAIN BUILDING—DRAINAGE.

"The earthenware (9-inch diameter) house drain in east wing is defective, open loose joints and open manholes therein. The brick house drain (720 square inches in area) in the cellar under the male prison and partly situated about one foot above the level of the floor is defective, the joints between the bricks are loose and open; the same conditions apply to house drain in cellar extending under milk hall in south wing.

"There are open non-trapped drains at floor surface in the cellar under plasterers' and plumbers' shops in south wing. Sewer connected area drains about the building are not trapped. The house drains receive the discharge of sewage and waste and hot water from numerous pipes about the building, and a constant large volume of hot water and steam from cooking apparatus in cook-house on ground adjoining, and steam from exhaust pipe of water-heating apparatus, and from steam trap in east wing.

IRON SOIL PIPES AND IRON WASTE PIPES.

"The lead calking in the joints connecting iron soil pipes and iron waste pipes in each ward from No. 1 to No. 30,

inclusive, and in Dormitories Nos. 41 and 44, and in doctors' quarters, rooms Nos. 2 and 4, has become loosened and forced out of place, rendering said joints defective. There are holes in the iron soil pipe in Ward No. 1, also in the iron waste pipes in the cellar under medical baths, and in cellar under elevator engine-room, and holes and loose joints in iron pipes in cellar in east wing and in cellar under drug store and in Ward No. 16. The iron main pipe extending through the doctors' quarters in main building is sagged and forms a trap in its horizontal line in the cellar under the drug store, endangering the water seal by siphonage of traps of plumbing fixtures above. The sewer connected bottle-washing sink in said cellar is not trapped.

MAIN BUILDING—BRANCH LEAD WASTE PIPES AND LEAD TRAPS.

" We found the branch lead waste pipes and branch back air pipes and lead traps of both sinks and bathtubs in each ward from No. 1 to No. 30, inclusive, and in female prison, battered and bruised, thereby reducing area of same and retarding great discharge of waste matter therefrom. Said pipes and traps are more or less slit or broken and leak, and are tied up with rags and putty and covered with numerous coats of paint. The seals of trap under sink in operating room, Wards Nos. 2, 7 and 8, are drawn out and do not retain a water seal. The brass waste pipe of sink in operating room, Ward No. 15, is broken and leaks. From all the above-described defects in house drains, soil and waste pipes and lead traps, offensive sewer air escapes into the building.

MAIN BUILDING—WATER-CLOSETS.

" The water-closets throughout the building consist chiefly of iron hoppers, provided with swinging seats, and serve as urinals; others are iron body, washout closets with traps above the floor, thus forming a fouling space; said closets are corroded,

offensive and cannot be kept clean. Owing to the absence of urinals in male wards, and the absence of suitable slop sinks in both male and female wards, the water-closets are utilized as urinals and as receptacles for the contents of bed-pans, cuspidors, etc., and seats on water-closets are saturated and offensive. The iron bathtubs are located in an exposed space between water-closets and sink in each ward and are not screened nor protected as to privacy.

MISCELLANEOUS—MAIN BUILDING.

“The cellar floors are damp and partially covered with wood, which is broken and saturated. Where wooden casings are in use about the sinks throughout the building the wood is saturated and offensive. The inclosed light and air shafts about the building and into which the windows of adjacent wards on each floor open are utilized for the purpose of drying washed fabrics hung on lines therein; the walls and ceilings of said shafts and of cellars throughout the building are unclean. The iron sink in Ward No. 16, earthen slop sink in doctors' toilet, fifth floor, porcelain trap of sink in annex and vent-horn of porcelain water-closet in ladies' toilet, Ward No. 25, are each broken and leak. The roof over amphitheatre leaks, rendering ceiling of same damp. The cellars under male and female prison wards are damp and foul smelling and not ventilated to the external air. A large portion of the cooking in cook-house is done in steam-jacketed kettles, and exhaust from same discharges into a twenty-inch brick drain, which receives the discharge from a large number of water-closets, baths, sinks, etc.”

The recommendations accompanying the report were as full and explicit as the report itself. To carry them out to the letter would involve an expenditure of about \$30,000. To replace simply the iron water-closets throughout the hospital with prop-

erly trapped porcelain closets would cost nearly \$8,500. In our estimates, prepared in February, the total sum allowed for plumbing in this hospital was only \$2,500. With this amount we have remedied some of the worst of the conditions above described. The rest will have to remain as they are until next year.

ELECTRIC LIGHTING SYSTEM OF BELLEVUE HOSPITAL.

On the 4th of June, having been informed that the electric-light wires in Bellevue Hospital were overloaded, we requested the New York Board of Fire Underwriters to examine the lighting system of the hospital. The report of their inspection showed that not only were the wires overloaded, but that the entire electric equipment was in a very defective and dangerous condition, especially in the main building. On receiving this report, a firm of consulting engineers was employed to inspect the lighting apparatus throughout the hospital, and to advise us how to make it safe, and as efficient as our funds would permit. The following is that portion of their report which relates to the main building:

REPORT ON THE ELECTRIC LIGHT WIRING IN BELLEVUE HOSPITAL.

"The main lines are run through the yard on poles, from which the supply lines are run to the different buildings. The system of wiring, if it can be dignified by the word 'system,' appears to have consisted on the main building of running the wires around on the balcony outside of the building and over the roofs, and tapping wires off and running through the windows to the different rooms which it was desired to light. This same thing has been done throughout the ground to a certain extent—that is, the service lines to the building have

been tapped off of the main lines, regardless of any system, sometimes with the main lines run into the building, at other times simply tapping off for a room here and there in a building as the main wires pass it.

"The male alcoholic ward and the isolated pavilion have modern wiring in them and are practically all right. Some of the work in the main hospital, notably on the top floor, is dangerous and should be taken care of at once. The centre of distribution in this building consists of porcelain cutouts, mounted on some wooden boards covered with asbestos. The wires run through the boards with absolutely no protection, except the insulation of the wire. The fuses at this point and in nearly every case throughout the building are exposed. At this particular point under the amphitheatre the beams have been covered with muslin and all the woodwork is very dry. The slightest spark from any of these wires, or from a fuse, is liable to set the place afire. The wiring is run on porcelain knobs where it can be seen, and we presume is run the same way behind the plaster. In places the insulation is in such poor condition that in case of moisture it would utterly fail to protect the wires. We found circuits consisting of two sizes of flexible cord and wire. A notable case of this was the circuit running to the X-ray machine. In general, the work seems to have been done in the easiest way, with any kind of material that happened to be on hand, without regard of the consequences.

"In numerous instances, where the wires come in at the window, they are brought through and a place gouged out of the window to leave room for them; in very few instances are the wires properly bushed where they come through. There are numerous cases where a flexible cord has been used for circuits, and where two flexible cords are dropped from one ceiling rosette. There are numerous cases of all kinds of violation of rules in regard to proper construction. The overhead

system outside would seem to be sufficient for the work it is doing after the lights are properly balanced inside of the buildings. The ideal conditions for an institution of this character would, of course, be a central plant, with the system of distribution run underground, coming into the basements of the different buildings and then distributing in a proper manner inside. The conditions at the hospital are about as far as possible from the ideal conditions. They can, however, be very greatly improved without any radical change in the pole line outside. The conditions on the top floor are so bad that something will absolutely have to be done in order to make the building reasonably safe. Down below the conditions are not so dangerous, but are bad. In this main building the hazard is so great that we would advise that what you do should be done in a first-class manner."

Detailed instructions accompanied the report, and plans and specifications were prepared to carry them out as expeditiously as possible. In November bids were called for and early in December a proposal was accepted for the extension and repairing of the entire electric-light system of the hospital, at a cost of \$9,586, and the work is now in progress.

MEDICAL SERVICE.

A change of some importance in the medical service was made in October last, when, in order to relieve the attending physicians and surgeons, who had difficulty in completing their rounds, a supplementary visitation of the outlying wards was assigned to the assistant attending physicians and surgeons. The regular physicians and surgeons still visit these wards when their duties permit, but provision is now made for their absence. Under this plan the assistants become part of the active staff of the hospital, while continuing to act as substitutes in the other wards whenever the regular attending physicians or surgeons are absent.

THE NURSING SERVICE.

The responsibility for the nursing of patients in Bellevue Hospital was until last year divided between two schools, the Bellevue Training School for Women Nurses and the Mills Training School for Men Nurses. The former school had charge of the wards for women and children, and the latter school the wards for men. The two schools were entirely independent of each other and each had its own superintendent of nurses. This arrangement was peculiar to Bellevue and was the source of some of the many evils that have afflicted this hospital. In other hospitals all the patients, men and women, are nursed by women, men being employed in the men's wards simply as orderlies to assist in the heavier work. In Bellevue the men's wards have been utilized to train men nurses, no women entering them except the superintendent of the school. In this the hospital has rendered a service to the public, but has not been quite just to its own patients. The experience of other institutions has shown that the best results are obtained by having a woman nurse in charge of every ward (with perhaps one or two exceptions), with one or more men nurses under her in the men's wards to do the kind of work that can be more suitably and easily performed by men.

The Boards of Managers of the two training schools, becoming convinced of the soundness of these views, have placed the entire nursing service under the direction of the Superintendent of the Training School for Women Nurses, with assistants to aid her in the instruction and oversight of the pupil nurses, both male and female. This centralization of authority will, it is believed, largely increase the efficiency both of the hospital administration and of the nursing service. Women head nurses have already been placed in the men's ward of the Pavilion for the Insane and in several other wards for men, and the remaining men's wards, with the exception of

the men's prison ward, the men's alcoholic ward and the genito-urinary wards, will be supplied with women head nurses as rapidly as money becomes available. Men nurses will be trained and graduated as before, but in somewhat smaller classes. Though fewer in number, they will be better nurses, as they cannot fail to profit by the constant oversight of women. The women nurses will also gain in experience, as the men's wards contain nearly two-thirds of the patients in the hospital. A Committee on Nursing, consisting of two members of the Medical Board and two members of the Board of Managers of each of the training schools, has been appointed to supervise the general policy of the nursing service of the whole hospital.

CHANGES IN THE PAVILION FOR THE ALLEGED INSANE.

The care of persons alleged to be insane has always been one of the most difficult problems in the management of Bellevue Hospital. The pavilion provided for their reception, though it has recently been doubled in size, is still much too small. The plan of the building has no relation to its purpose. It would need to be entirely remodeled to fit it for the intelligent treatment of the insane. The plumbing is defective and there is no ventilation whatever. The system of heating is crude and even dangerous, and should be entirely changed. In each of the bedrooms are steam radiators covered with heavy wire screens and rods, which have served more than once as weapons in the hands of a maniac.

Previous to this year the patients were in charge of a physician who devoted his time exclusively to their care, but was without previous experience in the treatment of the insane. He had no assistant, and during his absence the members of the regular house staff of the hospital performed his duties in addition to their own as best they could. This arrangement

seemed unwise to the Board of Trustees, and on February 15 Dr. Flavius Packer, Assistant Resident Physician at the Matteawan State Hospital for Insane Criminals, and with some ten years' previous experience in other State Hospitals for the Insane, was appointed Resident Physician, and Dr. M. S. Gregory, Assistant Physician at Kings Park Hospital, Long Island, was appointed Assistant Resident Physician at the Pavilion. Under Dr. Packer, modern methods have been introduced at the Pavilion. A system of hospital treatment has been adopted, so that all cases are given the benefit of the same service as in a general hospital for the care and treatment of the insane.

By resolution adopted at the meeting of the Board of Trustees on August 28, it was decided to abolish the positions of Examiners of Lunacy, and to assign the duties up to that time performed by them to the Resident Physicians of the Pavilion. The employment of skilled alienists in the place of internes inexperienced in the treatment of mental diseases made such a change possible. The fact that the Examiners in Lunacy had their own private practice and were required to attend at the Pavilion for but two hours in the afternoon of each week day necessitated many delays in the examination of such cases as for any reason were not ready for treatment in those hours. These delays and the shortness of time allowed for observation made the continuance of these positions inadvisable, in view of the fact that the Resident Physicians are permanently at the Pavilion. This addition to the duties of the resident staff made it desirable to acquire the services of a Second Assistant Resident Physician, and Dr. De Witt C. MacClymont was engaged from Kings Park Hospital, Long Island, and began his service on October 1. The additional responsibility necessitated an increase in the salaries for the resident staff, but this increase was more than met by the saving of the salaries of Examiners,

so that the present salary list of the Pavilion for the Insane is less by \$400 per annum than before.

EMERGENCY HOSPITAL.

Numerous improvements and repairs have been made at the Emergency Hospital. Fire escapes have been provided at the front and rear of the main building, and a steel bridge has replaced the wooden one connecting the hospital with the annex in the rear. A steel fence now incloses the hospital, and the flagging in the rear yard has been relaid.

The entire interior of the hospital has been repainted. The lying-in ward has been furnished with ten new beds and glass bed stands, and new linen closets have been provided. A new desk telephone and medicine cabinet have been added to the office. The operating-room has been refurnished with a new sterilizer, instrument cabinet, two glass tables, a glass instrument table, new operating table, aseptic washbowl and other necessary articles of equipment. The lower floors have been relaid with linoleum. New ice boxes, tables, tubs and clothes boxes have been provided, and minor improvements and repairs have been made throughout the hospital.

GOUVERNEUR HOSPITAL.

Gouverneur Hospital, at Gouverneur slip and the East river, is the only modern fireproof hospital owned by the City. It was opened in January, 1901, and has a capacity of about one hundred beds. The wards are large, well proportioned and flooded with sunshine at all hours of the day. The administration portion of the building is also well planned. The hospital is, however, not complete. The original plans called for two ward wings and an administration building, but one of the wings only was constructed. In consequence there are only four wards, whereas the proper division of the service

requires six. There is but one elevator, which must serve alike for patients, visitors, employees and freight. There are also no living rooms for the male employees and no stable for horses and ambulances. The City is obliged to pay \$1,200 a year rental for a nearby stable, an old building in bad repair, in the second story of which are quartered the male employees in very unsanitary surroundings. The old hospital building is used as a dormitory for the female employees.

The principal fact of interest in connection with Gouverneur Hospital during the past year was the establishment on December 16 of a dispensary for the treatment of trachoma in the old hospital building. This was done at the urgent request of President Lederle, of the Department of Health, whose inspectors had been excluding from the public schools hundreds of children suffering from trachoma. These children were not permitted to return until treated or cured, yet no hospital controlled by the City offered treatment for trachoma, and the private dispensaries were unable to meet the demand. As the City excluded these children from the schools, it seemed only fair that it should provide treatment for them. The work developed into something more than a dispensary, pure and simple, inasmuch as many of the cases required an operation under an anæsthetic, and this in turn required the keeping of the little patients over night in wards especially provided for them.

The need of such a dispensary is shown by the fact that 1,412 old and 976 new cases, a total of 2,388, were treated between December 16 and December 31, 1902, and 127 operations were performed in the same period. The Board of Health supplies the physicians at this clinic, but all else—beds, instruments, drugs, nursing, attendance, etc.—is furnished by the Trustees.

The most important improvements at this hospital have been the fitting up of a clinical laboratory on the first floor; the

repairing of the interior telephone service; the formation of two new dormitories for women helpers in the old hospital building, and the painting of two of the wards.

HARLEM HOSPITAL.

This hospital is an old three-story wooden dwelling-house, which has been used for many years as a hospital, though not at all adapted to the purpose. Because of insufficient appropriations it had been allowed to get into a very dilapidated condition. Upon our first inspection in February the roofs of the main building, the dispensary and the stable were found to be leaking badly. The ceilings in the isolated ward, the male dormitory and the laundry were out of repair, portions of the plaster having fallen from time to time. Since then the ceilings in nine other wards and service rooms have threatened to fall. On Sunday, June 15, a large part of the ceiling in the female medical ward actually did fall. The ward was full of patients at the time, three of them having just undergone serious operations. Fortunately, only one patient was hurt, she being slightly cut on the head by a piece of plaster. The ceiling had probably been loosened by a thunder storm the night previous. There was no crematory, the soiled dressings being sent to the Almshouse crematory to be destroyed. There were but two bathtubs in the whole hospital, one for the use of the medical staff, the other for the use of the patients, thirty-nine in number. The patients' bathtub was located in the middle of the diet kitchen of one of the wards. The water-closet for the use of the female medical patients was in the diet kitchen attached to their ward. The water-closet of the isolated ward was in the open ward with the beds, in plain view of the patients and with no ventilation whatever except into the ward.

At a cost of a little under \$1,000 the worst of these conditions have been improved; roofs have been made waterproof,

metal ceilings have replaced plaster in most of the wards, three new bathtubs have been put in, water-closets have been removed from the diet kitchen and the isolating ward and erected in adjoining hallways, properly inclosed, and a new crematory has been built in the hospital grounds. At the same time work has been pushed on the plans of the new Harlem Hospital, to be erected on the east side of Lenox avenue, between One Hundred and Thirty-sixth and One Hundred and Thirty-seventh streets, and condemnation proceedings have been authorized for the acquisition of an additional plot of ground 200 feet square adjoining and to the east of the original site. Through this action on the part of the City authorities we have been enabled to plan the hospital to much better advantage and to provide for future extensions, which should meet the wants of the population of Harlem for many years to come. On July 15 Mr. J. H. Freedlander was employed as consulting architect upon the plans for the new Harlem Hospital, and on September 25 Mr. W. J. Baldwin was employed as consulting engineer to aid in the preparation of the ventilation and heating systems of the new hospital.

During September the nine-room house at No. 518 East One Hundred and Twentieth street was hired to provide quarters for the women employees and was furnished completely at an expense of \$209.85. Four nurses and ten of the help have been given rooms there. Not only is the relief from the overcrowding of the old building a great gain, but the character of the accommodation has had an appreciable effect upon the ease with which discipline is maintained. A sitting-room is now kept for those who wish to spend the evenings reading or sewing, while those who wish rest are not disturbed as formerly by the conversation of the others. By the removal of the women, room has been made in the sleeping quarters vacated for four of the men employees, and their removal in

turn has relieved the overcrowding in the dormitory for men over the stable. The additional expense incurred by the renting of this house amounts to something less than \$20 per month, the women having been boarded formerly in much less comfortable quarters at more than half of the new rent.

The overcrowding still continued, however, in the hospital proper, and this, combined with the uncomfortable condition of the miserably inadequate dispensary building, determined the Trustees to take radical action without waiting for the completion of the new hospital building. A resolution was accordingly passed at the Board's meeting of November 13 requesting the Sinking Fund Commission to conclude a lease of the large three-story wooden building at No. 521 East One Hundred and Twentieth street, immediately adjoining the present hospital building on the west. It is the intention of the Board to repair and refit this building at a cost of about \$3,000, to make it available for hospital and dispensary purposes, the first floor being converted into a dispensary of comfortable proportions and the floor above being divided into wards to be used principally for maternity cases. These cases have had to be delivered in the past in the common female medical ward, surrounded by patients afflicted with a variety of diseases and sometimes overcrowded as well. The old dispensary building is a wooden structure, and formerly served as a dispensary at Gouverneur, whence it was removed upon the completion of the new hospital there. It is so near the river bank in its present position that during the cold weather the tide has forced the ice against its flooring, with the result of tearing it open. The Sinking Fund Commission has approved the Board's plan for the lease of the adjoining house, and it should be possible in our next statement to report a great improvement in the condition of affairs at this hospital.

FORDHAM HOSPITAL.

Fordham Hospital is most unfortunately situated. It lies in the northwestern part of the Borough of The Bronx, far from the centre of the district it is designed to serve. The hospital occupies two wooden buildings upon leased property. One of the buildings, that containing the hospital wards, was erected by the City shortly after the lease was executed, as the dwelling-house already upon the ground proved to be only just large enough for the medical staff and nurses and female employees, leaving no room for patients. During the first year of occupation the level of the surrounding streets was lowered by the City, and the hospital now rests upon an eminence some 15 to 20 feet above the nearest street. The road into the grounds has never been properly graded, and in the winter often becomes almost impassable for the ambulances and the delivery wagons which supply the hospital. The situation, with the expenditure of considerable money, might answer for a convalescent home, but it is not the place for a hospital with an active, acute service. The hospital district extends from City Island, on the east, to the Hudson river, on the west, and from One Hundred and Seventieth street to the northern limits of the city. The average length of drive of the ambulance (with the patient) is three miles. Not only are the distances great, but the roads are rough and hilly, and extra heavy ambulances with two horses must be used. And when the hospital is finally reached, the tired horses must still face the steep ascent into the grounds.

The hospital itself is much too small for the demands made upon it. It is the only public hospital in the Borough of The Bronx. There are but two private hospitals in the whole borough, and they are four miles away. The hospital contains four wards of eleven beds each, and three of the wards are required for men. The one women's ward must answer for both medical and surgical cases, and even for maternity cases,

of which there are, from time to time, a number. The service is at times so active that patients still acutely ill or injured must be transferred a distance of five miles to Harlem Hospital, and the next day, perhaps, if that hospital is full, as it usually is, five miles farther to Bellevue or else across the river to the institutions on Blackwell's Island.

There is no ward for children. This is perhaps the greatest need of the hospital. It is very seldom that there are not some children among the patients, and they must be put into the men's or women's wards. Aside from the fact that there are no beds to spare for children, and that it is frequently necessary to put two children into one bed, from a moral standpoint it is wrong to put children into wards with adults, especially in a public hospital.

The laundry is so small that the clothes of the medical staff and nurses only can be washed there, the clothes of the patients having to be sent to Bellevue. There are no fit quarters for the men employees, who have to sleep in the damp basement and in small rooms over the stable, and facilities for isolating contagious cases and for burning soiled dressings have been entirely lacking.

For such doubtful advantages as these, the City has been paying a rental of \$5,100 a year, and, in addition, has spent many thousands of dollars in repairs and improvements. The Trustees are impressed with the shortsightedness of such a policy, and, while compelled to renew the lease until something better has been provided, cannot too strongly urge the erection at the earliest possible date of the new hospital contemplated by the Hennessey Bill, which became a law at the last session of the Legislature.

Despite our unwillingness to expend money in improving property shortly to pass from the hands of the City, certain repairs, additions, etc., were so urgently needed that they have

been made. Among these may be mentioned the building of an isolating pavilion, the mending of the roofs, improvement of closet space, enlargement of pipes, etc. A fire brigade has been established among the employees of the hospital, on the model of the Bellevue brigade.

Complaint has been made to the Trustees by the Supervising Nurse of the practice of the Courts in summoning as many as five employees at one time to testify in accident cases, which are frequent in this neighborhood. This has resulted at times in a very serious interruption of the work of the hospital, but the authorities have agreed to show greater consideration in the future.

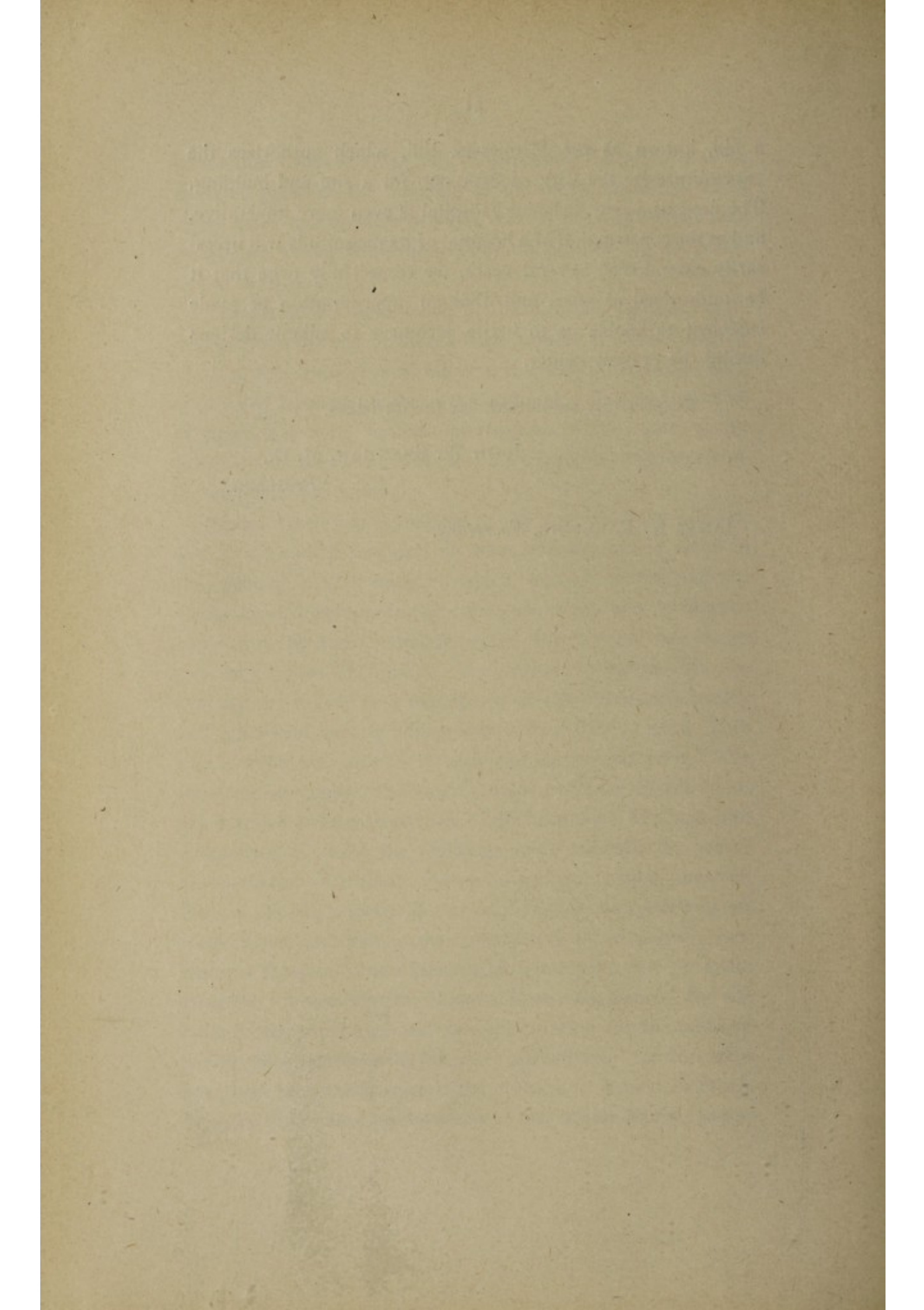
In the foregoing statement of the conditions in Bellevue and its dependent hospitals we have not referred in detail to the general lack of supplies which existed throughout the Department at the beginning of the year, as this was dwelt upon sufficiently by the Commissioner of Public Charities in his quarterly report of April 1. We decided to devote this, our first report, largely to a description of the unsanitary, unsafe and otherwise unfit buildings which The City of New York provides for the care of its sick and its injured poor. The shortage in supplies was quickly made good out of the funds granted us for the maintenance of the hospitals. We have also endeavored to make the buildings more habitable by means of repairs and alterations. As we have already stated, however, there is but one remedy, in our opinion, for the conditions set forth above, and that is the construction of an entirely new Bellevue Hospital, a new Harlem Hospital and a new Fordham Hospital. A new Harlem Hospital is already assured, the site having been purchased and an appropriation for the building having been approved by the City authorities. Certain steps have also been taken toward the erection of a new Fordham Hospital, the State Legislature at its last session having passed

a bill, known as the Hennessey Bill, which authorizes the expenditure by the City of \$500,000 for a site and building. The need of a new Bellevue Hospital is even more imperative, and as the construction of a hospital of its magnitude will necessarily extend over several years, we respectfully urge that it be authorized at once, and that an appropriation be made sufficient to enable us to invite architects to submit designs during the present winter.

Respectfully submitted, for the Trustees,

JOHN W. BRANNAN, M. D.,
President.

JAMES K. PAULDING, *Secretary.*



REPORT OF SUPERINTENDENT.

To the Board of Trustees, Bellevue and Allied Hospitals:

GENTLEMEN—I have the honor to present the following report of the operations of the hospitals in the Department during the year ending December 31, 1902, together with the reports of the Resident Physician of the Pavilion for Insane, the Superintendent of the Training Schools and the Supervising Nurses of the Dependencies.

There were remaining in the various hospitals in the Department on December 31, 1901, 836 cases, of which 707 were at Bellevue, 65 at Gouverneur, 29 at Harlem and 35 at Fordham.

There were admitted during the year 29,518 cases. Of these, 23,073 were admitted to Bellevue, 2,985 to Gouverneur, 2,345 to Harlem and 1,115 to Fordham. Of these admissions, 273 were born in the various institutions, as follows: Bellevue, 192; Gouverneur, 5; Harlem, 71; Fordham, 5. The total number of cases treated was therefore 30,354.

There were discharged and transferred during the year 27,102 cases. Of this number, Bellevue furnished 21,452; Gouverneur 2,614, Harlem 2,061 and Fordham 975.

The deaths numbered 2,357. At Bellevue there were 1,596; at Gouverneur, 355; at Harlem, 271, and at Fordham, 135.

The number of patients remaining in the Hospitals December 31, 1902, was 895. Of these, 732 were at Bellevue, 81 at Gouverneur, 42 at Harlem and 40 at Fordham. This shows an increased resident population at the end of the year of 59 over that of January 1, 1902.

The total number of cases, both old and new, treated in the various dispensaries of the Department was 257,565, or

an average daily attendance of 858 cases during the days the dispensaries were open.

In the alcoholic wards 4,381 men and 1,449 women were treated, a total of 5,830 cases. Of these, 90 men and 30 women died, the death rate being only slightly over two per cent.

The report of Dr. Packer, the Resident Physician at the Pavilion for Insane, deals with the conditions there existing and the statistics of his wards, and it is, therefore, unnecessary to summarize them here.

The four hospitals of the Department answered 14,874 ambulance calls, an average of over 40 a day.

During the eleven months of the year in which the hospitals were under the direction of the Board of Trustees there was expended for the maintenance of the institutions \$438,164.22. In addition, \$100,678.48 was expended for alterations, improvements, the maintenance of four dispensaries, new ambulance, horses and harness and departmental and extraordinary expenses.

The daily average per capita, based on the average daily population of patients, was \$1.47. For each hospital the per capita was as follows: Bellevue, \$1.39; Gouverneur, \$1.65; Harlem, \$2.04, and Fordham, \$1.97. It should be borne in mind in this connection that more than mere maintenance of patients and the payment of salaries are to be considered. In addition to the alterations, improvements, etc., the expenses for supplies, bedding and many miscellaneous articles were for the entire resident population, which averaged 1,595 daily; and, based upon this average, the daily per capita was \$1.01. The total amount expended, including all additions, improvements, etc., was \$538,842.70, expended as follows: For provisions, \$139,224.96, an average of \$12,656.81 a month; for salaries, \$143,661.78, an average of \$13,069.16 a month; for clothing and bedding, \$31,863.47, an average of \$2,896.68 a month; for

drugs and liquors, \$52,744.20, an average of \$4,794.93 a month; for surgical instruments and appliances, \$6,397.41, an average of \$581.58 a month; for fuel, \$27,970.88, an average of \$2,542.80 a month; miscellaneous, \$136,980, an average of \$12,452.73 a month.

Since the management of the hospitals in this Department was placed in charge of a Board of Trustees many and various improvements have been made and much has been done to add to the efficiency of the service and to raise the standard of care. There has been an improvement in the quality and quantity of food supplies and bedding; the wards throughout have been renovated by painting, and such furniture as our means afforded has been provided, while additional equipment for surgical instruments and surgical furniture has been furnished, and everything possible has been done to get the best results in our old buildings, the construction and arrangement of which are not in accordance with the views now held regarding model institutions. The two Training Schools have been brought under one management, and this has resulted in greater efficiency in the nursing corps. Miss Jane A. Delano, a graduate of the Training School connected with Bellevue, assumed charge on May 1, 1902. The Pavilion for Insane has been placed in charge of trained alienists, and the results accomplished there are to be found in the report of the Resident Physician.

The statistical tables, aside from those prepared by the Medical Board, are herewith appended.

The medical statistics have been prepared, under the direction of Dr. Alexander Lambert, by the Committee of Medical Statistics of the Medical Board of Bellevue Hospital.

Respectfully submitted,

M. J. RICKARD,

Acting Superintendent.

REPORT OF RESIDENT PHYSICIAN.

PAVILION FOR INSANE, BELLEVUE HOSPITAL.

To the Board of Trustees, Bellevue and Allied Hospitals:

GENTLEMEN—I have the honor to submit my annual report concerning the administration of the Receiving Pavilion for the Insane for the period beginning January 1, 1902, and ending December 31, 1902, and to say as follows:

I.—MOVEMENT OF POPULATION.

Remaining December 31, 1901, 17 men, 22 women; total, 39.

Admitted during the year, 1,218 men, 1,145 women; total, 2,363.

Transferred to the Manhattan State Hospital, 729 men, 826 women, a total of 1,555, or 65%.

Transferred to private institutions for the insane, 35 men and 31 women, a total of 66.

Transferred to other institutions, 41 men and 43 women, a total of 84.

Discharged to their own homes or the custody of friends, 272 men, 184 women, a total of 456.

Transferred to other wards, 110 men, 54 women, a total of 164.

Died, 34 men, 22 women, a total of 56.

Total number discharged: 1,221 men, 1,160 women, a total of 2,381.

Remaining December 31, 1902: 14 men, 7 women; total, 21.

2.—MEDICAL ADMINISTRATION.

a—Soon after the Board of Trustees assumed control of Bellevue and Allied Hospitals, namely, February 1, 1902, I was appointed Resident Physician in charge of the Pavilion.

Dr. M. S. Gregory, who had been an Assistant Physician at the Long Island State Hospital, Kings Park, and who had had many years' experience in the care and treatment of the insane, was appointed Assistant Resident Physician.

The necessary papers for the commitment of patients to institutions for the care of the insane were formerly made by visiting examiners in lunacy. This arrangement was most unsatisfactory, and the positions were abolished in September, since which time the work of making examinations for the commitment of patients has been performed by the resident physicians. This change has resulted in a greatly improved service by reason of the following:

The examination is now performed by those who are in direct charge of the patients, and who are in constant contact and association with them. This has to a considerable extent lessened the disturbance which formerly prevailed by reason of the introduction of physicians with whom the patients were unfamiliar, and has enabled the making of notes and observations necessary to prepare certification without exciting undue apprehension on the part of the patients, who are most suspicious as a class.

The above change made necessary the appointment of an additional Assistant Resident Physician, and Dr. D. C. MacClymont was transferred from the State Hospital service to this position, pursuant to Civil Service regulations.

b—In addition to the regular staff of Resident Physicians, a medical and surgical visiting staff has been appointed, thus affording to all the patients constant supervision by physicians highly trained in their various specialties, so that all patients

are given the benefit of the same treatment as is given in a general hospital.

c—The medical service has also been improved by the adoption of an improved system of case records. A record is now kept of the physical and mental condition of each patient. These records are supplemented by the daily notes of the nurses, under the direction of the medical officers, and contain a complete record of all medicines prescribed and any other matters which may properly pertain to the care and treatment of the patients, thus affording a complete history in detail of the treatment of the patient from the time of admission to the date of discharge.

3.—NURSING SERVICE.

a—It gives me great pleasure to report, and to lay especial stress upon the same, that in no department of the Pavilion has a greater improvement been effected than in the nursing service. At the time I assumed charge of the Pavilion considerable strides had been made by your Honorable Board in improving this service, and I am pleased to say that through your co-operation I have been able to extend it materially. For many previous years the nursing service in the men's ward had been inadequate, being supplemented by what were known as helpers at a low rate of wages. This system has now been entirely abolished and trained hospital nurses are now employed at a compensation which exceeds the sums paid in the State Hospitals for the Insane, thus enabling the Pavilion to give as high a grade of care and treatment of the patients as it is possible to introduce.

b—A woman nurse has been placed in general charge of the men's ward with most satisfactory results and tending materially to reduce disturbances, disorder and the use of improper language, as long experience has demonstrated that men

patients will not indulge to so great an extent in the use of improper expressions when a woman is in charge as when only men are employed.

c—On the women's side the administration was far superior to that of the men's side, by reason of the fact that the nurses are supplied by the Bellevue Training School, yet this service has been improved by increasing the number of nurses, and also by securing a greater permanency or a longer term of service. Both wards have been placed in charge of the Superintendent of the Training Schools.

Owing to the extension of the nursing service, the employment of more nurses, the higher rate of pay received, the service afforded by the Training School—it has been possible to partially abolish all forms of mechanical restraint. Long experience in the care and treatment of the insane has demonstrated that mechanical restraint could be entirely abrogated, provided the nursing service was sufficiently increased; in other words, the mere physical presence of a sufficient number of nurses would tend to quietness and order on the part of patients, where disorder and violence had formerly prevailed. Mechanical restraint is now only applied on the immediate order of a medical officer. The use of waist straps, belts and cuffs has been absolutely discontinued. The only restraint which is applied, even under the direction of a medical officer, is a restraining bed sheet and bandages.

The use of sedatives has been reduced to a minimum, and they are used only on the prescription of a medical officer.

4.—PHYSICAL CARE OF PATIENTS.

a—Bathing facilities have been greatly improved. In place of the unsanitary and dangerous tubs, the use of which in many institutions throughout the country has resulted in broken limbs

and scalding, a system of spray baths has been provided, which is not only more cleanly, but more easily applied, and, incidentally, the time consumed in bathing has been greatly reduced. Portable tubs have been provided for hydro-therapeutic purposes. The daily bath, as obviously must be the case, has a most beneficial effect on the patient's physical health.

b—The former practice of permitting patients to wear the clothing worn when they were received has been entirely discontinued. The majority of the patients come from surroundings which are, to say the least, unsanitary and liable to the introduction of contagious and infectious diseases. The clothing of patients as they are now received is entirely removed and hospital clothing is supplied throughout in the form of underclothing and pajamas for men and underclothing and suitable dresses for the women.

c—The hair and beard of the men patients is now carefully trimmed, and, in the case of patients who do not wear beards, shaving is practiced as often as necessary, so that the patients shall at all times present a cleanly and wholesome appearance. Care is also taken of the hair of women patients to see that it is kept in an orderly condition.

5.—TABLE.

The dining service has been greatly improved by the introduction of tablecloths and the substitution of a good grade of crockery in place of the tinware which was formerly provided; in other words, the service has been brought, as far as the conditions will allow, into complete harmony with the administration of a well-conducted hospital for the insane. In no department of the service has the change redounded more to the comfort and appreciation of the patients than in the dining service.

6.—IMPROVEMENT OF WARDS.

In conformity with the suggestions of your Honorable Board, the following changes have either been effected or have been provided for :

a—Rooms have been arranged for the resident medical officer in the Pavilion proper, so that it shall be possible to be in close proximity to the patients, and this permits of at least one of the resident officers sleeping near the wards, where he may be close at hand should he be needed during the night.

b—The partitions between three rooms at the east end of each ward have been removed, making possible a small dormitory, where suicidal and troublesome patients may be treated under the constant supervision of the nurses.

c—The ground glass and screens have been removed, where possible, to give additional light and view, which permits of patients looking out of the windows, thus affording some diversion from the wearisome monotony of their detention.

d—The elevator has been removed, thus providing a large closet for each ward. All of the commode seats have been removed from the single rooms, thus doing away with the objectionable use of the night bucket, a system which is only necessary in a convict prison.

e—A partition has been placed across the west end of each ward, thus affording office accommodations and a quiet place where visitors may see their friends. This permits the nurse, much of whose time is taken up in keeping records, to keep the ward under supervision at all times by keeping open the door. This arrangement also permits of visitors seeing patients without the necessity of going directly into the wards, which frequently resulted in much commotion and disturbance.

Arrangements have also been completed whereby it is now no longer necessary for men patients to go into one end of the building and women at the other. This does away with the

necessity of going out of doors when it becomes necessary to go from one ward to another. Another great improvement has been the covering of the steam pipes throughout, so as to eliminate the possibility of suicide. Other minor improvements have been made, which add to the comfort of patients and facilitate the work.

7.—COMMITMENT OF PATIENTS.

Obviously, the vast majority of patients must first be received in the Pavilion for detention and examination, prior to commitment. It is gratifying, however, to observe that Dr. Frederick Peterson, President of the State Commission in Lunacy, has issued a circular letter to the medical profession, suggesting that the commitment be made directly from the home of the patient instead of securing in the first instance his detention in the receiving pavilion. This course has always been pursued in all cities of the State, with the exception of the cities included in Greater New York. If this practice could be followed, even to a moderate extent, much relief would be afforded to the Pavilion, a reduction in the cost of administration would be effected and the comfort of the patients greatly promoted.

b—Another great improvement in the commitment of the insane has been effected by the receiving of more patients now under the order of the Superintendent of the Poor instead of through a magistrate. Obviously, this change must work for the betterment of a most unfortunate class.

8.—REMOVAL OF ALIENS AND NON-RESIDENT INSANE.

Congress, at its last session, passed an act providing for more effectually excluding alien insane. Generally speaking, all persons who have been insane within five years, or those who have had two or more attacks of insanity previous to their admission, are barred from entry, and such patients as may be admitted under these conditions may be returned at any time

within three years. The Commissioner-General of Immigration also has it in his power to provide for a corps of trained alienists to examine immigrants upon their arrival, to the end that those not entitled to admission under the statutes may be excluded. At the present time the physicians in charge of this work, in most cases, have not had the necessary opportunities for the study of such cases, and it is to be hoped that the Commissioner-General will make some provision whereby physicians who have had at least a few months' experience in a general hospital for the insane may be employed. The necessity of this is apparent even under the new statutes, for it is not an uncommon occurrence for patients to be admitted to the Pavilion who have not been in the country thirty days.

Through the orders of the State Commission in Lunacy, all cases now found to be insane are promptly removed to the State hospitals, thus devolving upon the State the return to foreign countries or to other States of patients who are not properly a charge upon the City of New York. This order has materially affected the administration of the receiving pavilion.

It is gratifying to be able to report that out of a total population of nearly 2,500, only two accidents have occurred, namely, one suicide and one case of self-mutilation. Both of these cases were promptly reported in writing at the time, and were laid before your Honorable Board. Complete investigation of the circumstances surrounding each case failed to disclose that the accidents were due to negligence or neglect.

In conclusion, permit me to thank the Board for their hearty support and co-operation in the management of a most difficult department of hospital administration.

Respectfully submitted,

FLAVIUS PACKER,

Resident Physician.

REPORT OF SUPERINTENDENT, TRAINING
SCHOOLS FOR NURSES.

To the Board of Trustees, Bellevue and Allied Hospitals:

GENTLEMEN—I have the honor to submit to you the following report of the two Training Schools for Nurses connected with Bellevue Hospital, together with list of managers and officers connected with each:

BELLEVUE TRAINING SCHOOL FOR WOMEN
NURSES.

INCORPORATED 1874.

President.

MRS. WM. PRESTON GRIFFIN, 208 East 15th Street.

Vice-President.

MRS. ROBT. HUNTINGTON, Rhinebeck, N. Y.

Secretary.

MRS. WM. CHURCH OSBORN, 40 East 36th Street.

Treasurer.

MR. JAMES STILLMAN, The Second National Bank.

Assistant Treasurer.

MRS. ELLIOT BENEDICT.

Superintendent.

MISS JANE A. DELANO.

First Assistant Superintendent.

MISS CARRIE J. BRINK.

Second Assistant Superintendent.

MISS MARY A. CLARKE.

Managers.

MRS. JAMES H. BENEDICT.....	14 East 70th Street.
MRS. WHITELAW REID.....	451 Madison Avenue.
MRS. J. MILTON GOETCHIUS.....	52 West 58th Street.
MRS. FRANCIS M. SCOTT.....	42 Park Avenue.
MRS. MOSES HOPKINS.....	1 East 56th Street.
MRS. WM. CHURCH OSBORN.....	40 East 36th Street.
MRS. ROBERT TEMPLE EMMET.....	New Rochelle, N. Y.
MRS. HARRIET D. FELLOWES.....	14 Fifth Avenue.
MISS ELIZABETH D. H. KEAN.....	3 East 56th Street.
MISS GEORGIE ISELIN.....	23 Madison Square, N.
MISS HARRIETTE ROGERS.....	56 East 78th Street.
MISS ALICE E. PINE.....	45 Fifth Avenue.
MRS. JOHN W. BRANNAN.....	11 West 12th Street.
MRS. WM. B. RICE.....	17 West 16th Street.
MRS. HERBERT L. COFFIN.....	128 East 29th Street.
MISS ANNA LUSK.....	47 East 34th Street.
MISS RUTH MORGAN.....	26 Washington Square.
MRS. JOHN L. WILKIE.....	152 West 12th Street.
MRS. ELLIOT BENEDICT.....	51 East 78th Street.

The School maintains:

A Home for Pupil Nurses while in Training;

A Registry for Graduate Nurses; and

The Edith Summer Home, at Belle Island, Conn., open during the summer months as a vacation home for Nurses.

Office and Training School, 426 East 26th Street.

Since the establishment of the School, 678 women have graduated as nurses, and are located in every State in the Union.

We have also nurses in positions of responsibility in various parts of the world—Turkey, China, India, South Africa, Persia, Hawaii, Holland, etc.

The following is a summarized statement concerning the graduates:

In private nursing.....	287
Married	125
Institution work.....	73
At Home.....	77
Died	63
Unknown	24
Practicing Medicine.....	14
District work.....	15
	<hr/>
Total	678
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The present census of the School is:

Superintendent	1
Assistant Superintendents.....	2
Night Superintendent.....	1
Clinic Nurse.....	1
Dispensary Nurse.....	1
Supervising Nurse, Emergency Hospital.....	1
Supervising Nurse, Female Insane Ward.....	1
Supervising Nurse, Female Alcoholic Ward.....	1
Pupil Head Nurses.....	14
Senior Nurses.....	24
Junior Nurses.....	38
Probationers	4
	<hr/>
Total	89
	<hr/> <hr/>

The Committee of the Training School for Nurses has made arrangements with the authorities of Bellevue Hospital for giving three years' training to women desirous of becoming professional nurses.

Those wishing to obtain this course of instruction must apply to the Superintendent of the Training School, No. 426 East Twenty-sixth street, New York, upon whose approval they will be received into the School for two months on probation. The acceptable age for candidates is from twenty-five to thirty-two years. The applicant should send, with answers to the paper of questions, a letter from a clergyman testifying to her good moral character, and from a physician, stating that she is in sound health. Applicants are received at any time during the year when there is a vacancy. During the months of trial, and previous to obtaining a position in the School, the applicant must be prepared for an examination in reading, penmanship, simple arithmetic and English dictation. The examination is to test the applicant's ability to read aloud well, to write legibly and accurately, to keep accounts and to take notes of lectures. This amount of education is indispensable for a member of the School, but applicants are reminded that women of superior education and cultivation, when equally qualified for nurses, will be preferred to those who do not possess these advantages.

The Superintendent has full power to decide as to their fitness for the work, and the propriety of retaining or dismissing them. She can also, with the approval of the Committee, discharge them at any time in case of misconduct or inefficiency. During the months of probation the pupils are boarded and lodged at the expense of the School, but receive no other compensation. It is not necessary that they should wear the uniform of the School, but must come provided with dresses of washing material for use in the Hospital. All clothing must be plainly marked.

Those who prove satisfactory will be accepted as pupil nurses, after signing an agreement to remain three years in the Training School for Nurses, and to obey the rules of School and Hospital. This agreement is binding, and no probationer should enter the School unless she is so situated that she can fulfill this agreement.

They will reside in the Home and serve as assistants in the wards of Bellevue; they will also be expected to perform any duty assigned to them by the Superintendent.

The pay is \$8 a month during the entire course. This sum is allowed for the dress, text-books and other personal expenses of the nurse, and is in no wise intended as wages, it being considered that the education given is a full equivalent for their service. They are required, after the months of probation, when on duty, to wear the dress prescribed by the institution, which is of blue and white seersucker, simply made, plain white apron and cap and linen collar and cuffs.

The day nurses are on duty from 8 A. M. to 8 P. M., with an hour off for dinner and additional time for exercise or rest. They are also given an afternoon during the week, and have a right to half of Sunday. A vacation of two weeks is allowed each year.

As the institution is unsectarian, there are no religious services connected with it, except evening prayers, and all the nurses are expected to attend the place of worship they prefer once on Sunday.

QUESTIONS TO BE ANSWERED BY CANDIDATE.

1. Name in full and present address of candidate.
2. Are you a single woman or widow?
3. What has been your occupation?
4. Have you ever been connected with any Training School for Nurses?

5. What Hospital training and experience, if any, and what other experience as a nurse have you had?
6. Age last birthday, and date and place of birth?
7. Height? Weight?
8. Where educated?
9. Are you strong and healthy mentally and physically, and have you always been so?
10. Are your sight and hearing perfect?
11. Have you any physical defects?
12. Have you ever had any disease of the lungs, or have you had any tendency to pulmonary complaint or rheumatism, and when?
13. Have you had quinsy, or diphtheria, and when?
14. Have you any uterine disease?
15. If a widow, have you children? How many? Their ages? How are they provided for?
16. Where (if any) was your last situation? How long were you in it?
17. Also state when you wish to enter.
18. The names in full and addresses of two persons to be referred to. State how long each has known you. If previously employed, one of these must be the last employer.
19. Are you free to remain three years?
20. Have you read and do you clearly understand the regulations?

I declare the above statement to be correct.

Date,

Signed,

Candidate.

THE BELLEVUE HOSPITAL TRAINING SCHOOL
FOR MALE NURSES.

Established 1888.

UNDER THE DIRECTION OF THE
BOARD OF TRUSTEES OF BELLEVUE AND ALLIED HOSPITALS,
New York City.

JOHN W. BRANNAN, M. D., President.

Managers of the Training School:

GEORGE B. FOWLER, M. D., Chairman.
OGDEN MILLS, Esq., JOSEPH D. BRYANT, M. D.,
Hon. JOHN G. McCULLOUGH, WALTER B. JAMES, M. D.,
W. GILMAN THOMPSON, M. D.

MISS JANE A. DELANO, Superintendent.

DR. LUCY A. BANNISTER, First Assistant Superintendent.

MR. ARTHUR W. LITTLE, Second Assistant Superintendent.

This School has a separate Home for Nurses in Training,
and the Alumni maintain a registry for graduate nurses.

Office and Home, No. 431 East Twenty-sixth street.

Since the establishment of the School, 273 men have graduated as nurses. Many of them did splendid service during the Spanish-American war in field hospitals, and in South Africa on the hospital ship *Maine*.

The following is a summarized statement concerning the Alumni of the School:

Private nursing.....	146
In business.....	48
Practicing Medicine.....	40
Deceased	16
In Custom House.....	2
Ministry	3
Unknown	18
<hr/>	
Total	273
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The present census of the School is:

Superintendent	1
Assistant Superintendents.....	2
Night Superintendent.....	1
Supervising Nurse, Male Alcoholic Ward.....	1
Supervising Nurse, Male Insane Ward.....	1
Supervising Nurse, Male Surgical Ward.....	1
Senior Nurses.....	35
Junior Nurses.....	42
Probationers	5
<hr/>	
	89
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The Managers of the Training School for Male Nurses have made arrangements with the Board of Trustees of Bellevue and Allied Hospitals to give a two years' course of instruction in nursing in Bellevue Hospital to men desirous of becoming professional nurses. Those wishing to receive this course will apply to the Superintendent of the Male Training School for

admission, and, upon recommendation of the Superintendent, they will be admitted to the School for one month on probation. The acceptable age of candidates is from 19 to 30 years. The applicant is required to forward to the Superintendent of the School complete and correct answers to the "Questions to be answered by the Applicant," together with a letter from a responsible person, certifying to his good moral character; also one from a reputable physician, certifying that he is physically and mentally sound. Applicants are received any time during the year when a vacancy exists. During the period of probation the applicant must be in readiness to pass an examination in reading, writing, simple arithmetic and English dictation. A proper amount of education is indispensable for admission to the School, but applicants are reminded that men of superior education and cultivation will be preferred to those who do not possess these advantages. The Superintendent of the School, with the approval of the Managers, has the power to decide as to the fitness of the pupils for the work and as to the propriety of retaining or dismissing them from the School. During the period of probation the pupils are boarded and lodged without expense to themselves, but receive no other compensation. Those who prove satisfactory will be accepted as Pupil Nurses, provided that they agree to remain two years in the School and that they obey the rules and regulations of the School and of the Hospital. It should be understood by all who seek admission to the School that the course of instruction is not designed for those who contemplate the study of medicine. The pupils will reside in the Home connected with the School and serve as nurses in the wards of Bellevue Hospital. The second year they will be required to perform any duty assigned to them by the Superintendent of the Hospital or elsewhere. The allowance during the entire course is \$10 a month. This sum is for the purchase of clothes, text-books, etc., and to meet the other

personal expenses of the pupil. It is not intended as wages, since it is considered that the education given is a full equivalent for the services rendered. After the expiration of the term of probation the Pupil Nurses are required to wear the prescribed dress of the School while on duty. The clothing of the pupils should be plainly marked.

The day Nurses are required to do duty from 8 A. M. to 8 P. M. They are allowed a suitable time for meals and for exercise and rest. Each pupil is, at the discretion of the Superintendent, allowed an afternoon each week, and also half of each Sunday, for the purpose of attending religious services. As the institution is unsectarian, religious services are not connected with it, but all nurses are expected to attend a place of worship once each Sunday. A vacation of two weeks is allowed each year.

The instruction which is given is largely of a practical character and thoroughly fits the nurse for the successful exercise of his calling.

Such of the pupils as complete the course satisfactorily to the Managers are subjected at its termination to an examination, which is intended to test their general fitness for the work of nursing in private. If they attain the percentage required they are recommended to the Board of Trustees for diplomas, which certify to their having graduated from the School.

QUESTIONS TO BE ANSWERED BY CANDIDATE.

1. Name in full, and present address of candidate.
2. Are you single, married, widower?
3. What is your present occupation?
4. What has been your occupation?
5. Age last birthday, and date and place of birth?
6. Height? Weight?

7. Where educated, and what language or languages do you speak?
8. Are you an American citizen?
9. Are you strong and healthy and have you always been so?
10. Are your sight and hearing perfect?
11. Have you any physical defects?
12. Have you any tendency to pulmonary complaints?
13. What contagious diseases have you had?
14. Do you use intoxicating beverages, and to what extent?
15. Do you use tobacco, and in what form?
16. Where (if any) was your last situation? How long were you in it?
17. The names in full and addresses of two persons to be referred to. State how long each has known you. If previously employed, one of these must be the last employer.
.....has known me.....years.
.....has known me.....years.
18. Have you read and do you clearly understand the Regulations?

I declare the above Statement to be correct.

Date,

Signed,

Candidate.

OUTLINE OF CURRICULUM.

SESSION FOR 1903-1904.

JUNIOR YEAR.

BEGINS TUESDAY, SEPT. 1, 1903.

ONE RECITATION A WEEK THROUGHOUT THE YEAR.

(For Both Schools.)

Anatomy and Physiology—

General outline of body.
 Structural elements.
 Various tissues of body.
 The skeleton and joints.
 Muscular system.
 Nervous system.
 Vascular system.
 Respiratory system.
 Alimentation.
 Elimination.

FIRST HALF OF SESSION, 20 LESSONS.

(For Both Schools.)

Materia Medica and Toxicology—

Various tables.
 Weights and measures, with practical demonstration of
 same.
 Administration of drugs.
 Definition of terms.

Disinfectant solutions.

Tables, etc.

Antispasmodics.

Anæsthetics.

Somnifacients.

Delirifacients.

Excito-motors.

Depresso-motors.

Cardiac stimulants.

Cardiac depressants.

Astringents.

Tonics.

Alteratives.

Aromatics.

Emetics.

Cathartics.

Diuretics.

Diaphoretics.

Expectorants.

Anthelminics.

SECOND HALF OF SESSION, 5 LESSONS.

Dietetics—

Food, its uses and classification.

Food principles.

Chemical composition of the human body.

Preparation of food, including care of fire and methods of cooking.

Selection and preservation of food.

Adaptation of food to various conditons, climate, occupation, age.

Special selection of food in disease.

SECOND HALF OF SESSION, 5 LESSONS.

Hygiene—

- Personal hygiene.
- Cleanliness.
- Exercise.
- Clothing.
- Diet.
- Sleep.
- Hygiene of sick-room.
- Ventilation.
- Chemistry of air.
- Pollution of air.
- Methods of removing dust.
- Regulation of light and heat.
- Disposal of excreta.
- Care of soiled linen.
- Care of utensils and various appliances, including disinfection and sterilization.

Water—

- Chemistry.
- Comparative purity.
- Source of contamination.
- Purification.

Ice—

- Impurities.
- Use.

Bacteria—

- Their place in nature.
- Relation of hygiene in health and disease.
- Modes of infection.
- Principles of disinfection.

JUNIOR YEAR.

PRACTICAL NURSING.

ONE LESSON A WEEK WITH DEMONSTRATIONS DURING FIRST
YEAR.

Description of Ward or Sick Room—

- Furniture and supplies needed.
- Clothing for bed patients and convalescents.
- Care of supplies.
- Mechanical appliances for medical and surgical cases.

Beds and Bed-making for—

- Bed patients.
- Convalescents.
- Fractures.
- Post operative cases.
- Water and air beds.

Admission of Patients—

- General observation of symptoms.
- Temperature, pulse and respiration.
- Keeping of charts and records.

Baths—

- Temperature of various baths and methods of administration.
- Simple baths for cleanliness.
- Medicated baths.
- Foot baths.
- Sitz baths.
- Hot air baths.
- Steam baths.
- Hot and cold packs.

Cold affusions.
 Continuous bath.
 Sponge bath.

Enemata—

Appliances used.
 Method of preparation and administration.
 Rectal irrigation and flushing of colon.

Catherization—

Bladder Irrigation—

Vaginal Douches—

Appliances.
 Special preparations necessary.
 How to prepare septic injection.

External Application of Heat—

Dry heat:

Hot water bags.
 Flannel, etc.

Moist heat:

Fomentations.
 Poultices.
 Stupes.

External Use of Ice—

Ice bag.
 Ice coil.
 Direct application.
 Local ice pack.

Counter-Irritants—

Turpentine.
 Iodine.
 Cantharides.
 Cupping.
 Leeching.
 Use of cautery.

SENIOR YEAR.

MEDICAL NURSING.

FIRST HALF OF SESSION, 20 LESSONS.

(For Both Schools.)

Fever Nursing—

General directions for care of fever patients.

Continued fevers.

Special care of typhoid fever.

Periodical fevers.

Eruptive fevers.

Diseases of Digestive Tract—

Gastritis, acute, chronic.

Cancer.

Ulcer.

Intestinal indigestion.

Intestinal colic.

Constipation.

Colitis.

Diarrhea.

Dysentery.

Cholera.

Cholera infantum.

Appendicitis.

Intestinal obstruction.

Parasites.

Diseases of Respiratory System—

Coryza.

Tonsillitis.

Laryngitis.

Pharyngitis.

Bronchitis.

Medical Emergencies—

Fainting.
 Apoplexy.
 Convulsions.
 Hemorrhage.
 Heat stroke.

Nursing in Mental Diseases—

Care of alcoholic patients.

Special Nursing in Diseases of the Eye and Ear—

SURGICAL NURSING.

SECOND HALF OF SESSION, 15 LESSONS.

(For Both Schools.)

Asepsis.

Antisepsis.

Technique of operating-room.

Preparation and care of dressing and surgical supplies.

Anesthesia.

After-care of patient.

Various wounds and methods of healing.

Emergency, Treatment of—

Fractures.

Dislocations.

Sprains.

Contusions.

Burns.

Scalds.

Frost-bite.

Hemorrhage.

Shock.

Methods of Transfusion.
 Hypodermoclysis.
 Wound Infection.
 Septicaemia.
 Pyæmia.
 Cellulitis.
 Erysipelas.
 Tetanus.
 Special nursing in diseases of bones and joints.
 Application and care of orthopedic apparatus.
 Bandaging and use of splints.

SENIOR YEAR.

OBSTETRICAL NURSING.

For Women Pupils Only. 20 Lessons.

Organs of generation.
 Anatomy of pelvis.
 Signs of pregnancy.
 Development of foetus.
 Hygiene of Pregnancy—
 Diet.
 Exercise.
 Clothing.
 Complications of pregnancy.
 Preparation for Labor—
 Special preparation of room and patient, both in hospital
 work and private nursing.
 Stages of Labor and Their Management—
 Special nursing in Cæsarian Section, craniotomy and
 symphysiotomy.
 After-care of mother and child.

Complications of Puerperal Period—

Convulsions.

Septicæmia.

Hemorrhage.

Breast infection.

Phlebitis.

Feeding of infant.

Preparation of artificial foods.

Points to observe in new-born.

Care of premature infants in incubator.

GYNECOLOGICAL NURSING.

FOUR LESSONS.

For Women Pupils Only.

Definition of terms.

Special preparation of patient for examination, treatment and operation.

Gynecological positions.

Various operations and special care following each.

SPECIAL NURSING IN GENITO-URINARY DISEASES.

FIVE LESSONS.

For Men Nurses Only.

Anatomy and physiology of the genito-urinary system.

Use of catheters.

Care of bougies, sounds, etc.

Preparations for special operations, and after-care of patient.

URINALYSIS.

FOUR LESSONS.

(For Each School.)

The instruction given during the past year has included class work, conducted by the officers of the two schools, besides instruction, practical demonstrations and lectures given by the following physicians: Dr. Robert J. Carlisle, Dr. William C. Lusk, Dr. George D. Hamlen, Dr. W. J. Pulley and Dr. Joseph Nutt.

No better facilities for the training of nurses can be found than are offered by Bellevue Hospital. Being largely an emergency hospital, the service is most active.

During the past year the number of patients cared for has been large, and an effort has been made to combine the teaching as far as possible, thus giving both schools the benefit of any special opportunities for experience and training.

There have been many changes in the Home for Women Nurses, and most generous contributions have been received from various members of the Board of Managers.

The building formerly occupied as a mission chapel was entirely remodelled and attractively fitted up for nurses. Last Spring the Training School again enlarged its quarters, taking in all of the adjoining building. A new laundry was equipped on the ground floor, and the upper floors used for additional rooms for nurses.

Repairs have also been made in the Home for Men Nurses, and the first floor thoroughly painted and renovated.

A splendid new lecture hall and gymnasium, with a demonstration room adjoining is to be furnished through the kindness of the Board of Trustees, and will be used for the class work and lectures of both schools.

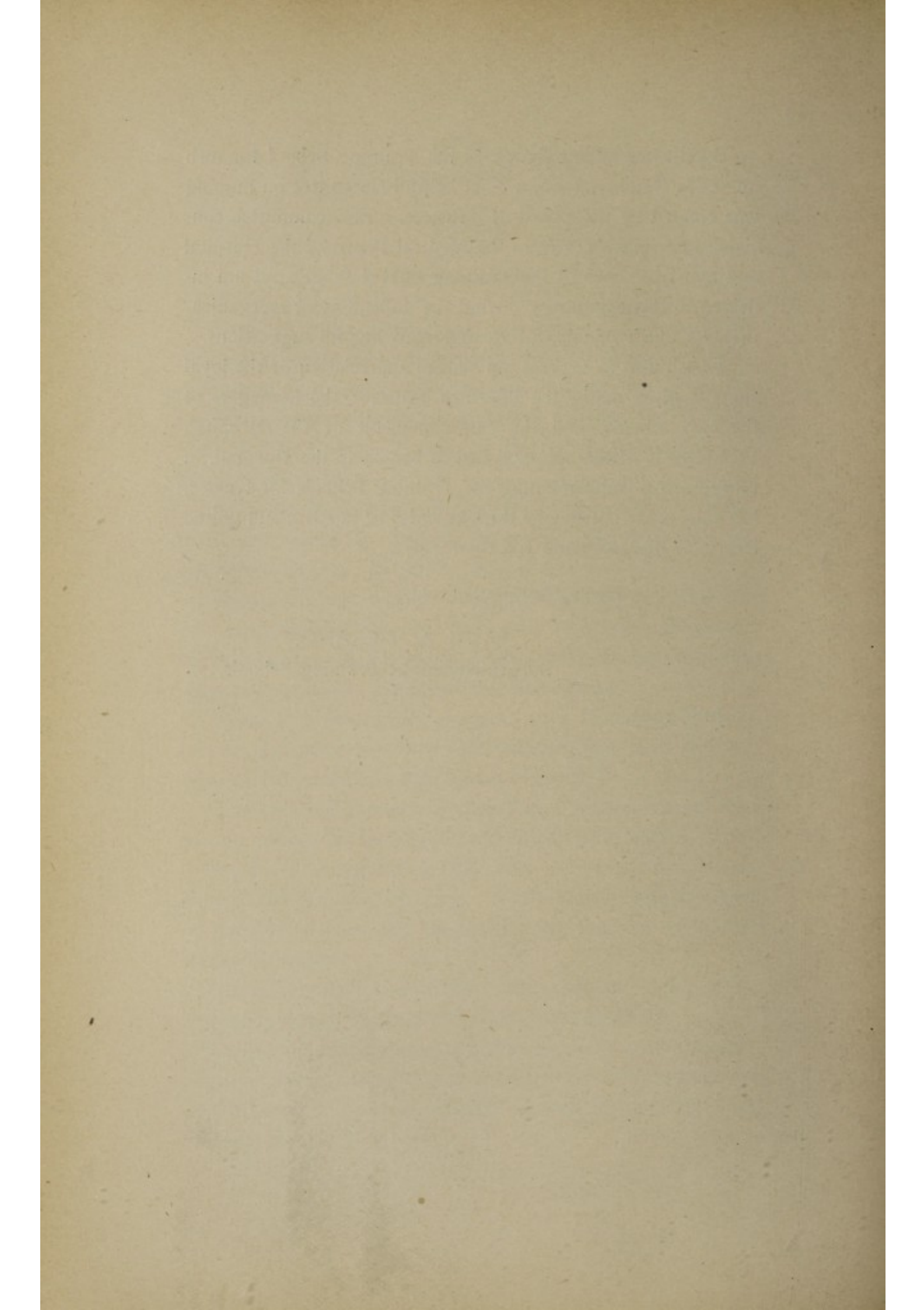
Soon after taking charge of the Training School for men nurses in October, 1902, a most helpful committee on nursing was created by the Board of Trustees. This committee consists of two members from the Medical Board of the Hospital and two from each of the Training School Boards. I am indebted to this committee, during the difficulties of reorganization, for much valuable advice and many helpful suggestions.

I wish also to express my sincere appreciation of the loyal support given me by the Board of Trustees, the Managers of the two schools, and the Superintendent of the Hospital. Whatever has been accomplished of benefit to the Hospital, in reorganizing and combining the Training Schools for Nurses, has been made possible by the singleness of purpose and united efforts of my assistants and co-workers.

Respectfully submitted,

JANE A. DELANO,
Superintendent of Training Schools.

July, 1903.



BELLEVUE AND ALLIED HOSPITALS

GENERAL STATISTICS

1902

THE HISTORY OF THE

REIGN OF

1001

TABLE No. I.—GENERAL STATISTICS.

BELLEVUE AND ALLIED HOSPITALS.

Census for the Year 1902.

	MEN.	WOMEN.	TOTAL.
Remaining in Hospital December 31, 1901	589	247	836
Admitted during the year	20,126	9,392	*29,518
Total treated	20,715	9,639	30,354
Discharged—			
Cured	7,684	3,279	10,963
Improved	5,475	2,109	7,584
Unimproved	713	295	1,008
Transferred to various institutions	4,645	2,902	7,547
Total discharged and transferred	18,517	8,585	27,102
Died	1,559	798	2,357
Remaining in Hospital December 31, 1902.	639	256	895
Total	20,715	9,639	30,354

*In this number are included 273 births.

Table No. I. (*Continued*)—General Statistics.

BELLEVUE HOSPITAL.

Census for 1902.

	MEN.	WOMEN.	TOTAL.
Remaining in Hospital December 31, 1901	504	203	707
Admitted during the year	15,774	7,299	*23,073
Total treated... ..	16,278	7,502	23,780
Discharged—			
Cured	5,899	2,485	8,384
Improved	4,788	1,785	6,573
Unimproved	385	183	568
Transferred to			
Manhattan State Hospital.....	730	825	1,555
City Hospital.....	1,191	726	1,917
Metropolitan Hospital.....	1,459	565	2,024
Almshouse	13	26	39
Randall's Island.....	42	53	95
Workhouse.....	114	55	169
St. Joseph's Hospital	2	1	3
Willard Parker Hospital	3	4	7
Lincoln Hospital.....	1	.....	1
Out-door Poor.....	67	50	117
Total transferred and discharged	14,694	6,758	21,452
Died	1,063	533	1,596
Remaining in Hospital December 31, 1902.....	521	211	732
Total.....	16,278	7,502	23,780

*Including 192 births.

Table No. I. (Continued)—General Statistics.

GOUVERNEUR HOSPITAL.

Census for 1902.

	MEN.	WOMEN.	TOTAL.
Remaining in hospital December 31, 1901.....	44	21	65
Admitted during year 1902.....	2,127	858	*2,985
Total.....	2,171	879	3,050
Discharged—			
Cured.....	989	365	1,354
Improved	186	84	270
Unimproved	306	101	407
Transferred to			
Bellevue Hospital.....	373	187	560
Willard Parker Hospital.....	13	2	15
Taken Home.....	7	1	8
Total transferred and discharged.....	1,874	740	2,614
Died.....	234	121	355
Remaining in Hospital December 31, 1902	63	18	81
Total	2,171	879	3,050

* Including 5 births.

Table No. I. (Continued)—General Statistics.

HARLEM HOSPITAL.

Census for 1902.

	MEN.	WOMEN.	TOTAL.
Remaining in Hospital December 31, 1901	12	17	29
Admitted during the year	1,378	967	*2,345
Total treated	1,390	984	2,374
Discharged—			
Cured	321	302	623
Improved	320	182	502
Unimproved	5	5	10
Transferred to			
Almshouse	3	2	5
Bellevue Hospital	205	146	351
Fordham Hospital	1	.....	1
Lebanon Hospital .....	.....	1	1
Lincoln Hospital	24	20	44
Metropolitan Hospital	113	73	186
New York Lying-in Hospital	1	1	2
Department of Out-door Poor	7	2	9
Randall's Island	18	14	32
St. Francis' Hospital .....	.....	1	1
St. Joseph's Hospital	4	2	6
St. Luke's Hospital	1	.....	1
St. Vincent's Hospital	1	.....	1
Willard Parker Hospital	16	2	18
City Hospital	167	101	268
Total discharged and transferred	1,207	854	2,061
Died	161	110	271
Remaining in Hospital December 31, 1902	22	20	42
Total	1,390	984	2,374

*Including 71 births.

Table No. I. (*Continued*)—General Statistics.

FORDHAM HOSPITAL.

Census for 1902.

	MEN.	WOMEN.	TOTAL.
Remaining in Hospital December 31, 1901	29	6	35
Admitted during year	847	268	*1,115
Total treated.....	876	274	1,150
Discharged—			
Cured	475	127	602
Improved	181	58	239
Unimproved	17	6	23
Transferred to			
City Hospital.....	18	9	27
Metropolitan Hospital.....	15	10	25
Almshouse .....	.....	1	1
Randall's Island	2	.....	2
St. Joseph's Hospital .....	.....	1	1
Riverside Hospital	1	.....	1
Lincoln Hospital	11	4	15
Bellevue Hospital	22	17	39
Total transferred and discharged	742	233	975
Died	101	34	135
Remaining in Hospital December 31, 1902.....	33	7	40
Total	876	274	1,150

*Including 5 births.

TABLE No. II.—GENERAL STATISTICS.

BELLEVUE AND ALLIED HOSPITALS.

Nativities of Patients Admitted During the Year 1902.

	MEN.	WOMEN.	TOTAL.
United States.....	9,408	3,929	13,337
Canada.....	192	66	258
England.....	566	311	877
Scotland.....	198	86	284
Wales.....	17	8	25
Ireland.....	4,105	2,433	6,538
France.....	101	47	148
Germany.....	1,769	653	2,422
Italy.....	1,082	299	1,381
Austria.....	431	285	716
Switzerland.....	82	32	114
Sweden.....	234	92	326
Russia.....	852	524	1,376
West Indies.....	59	29	88
Denmark.....	1	.....	1
Norway.....	3	.....	3
Hungary.....	1	5	6
Poland.....	1	1	2
Other countries.....	766	435	1,201
Unknown.....	258	157	415
Total.....	20,126	9,392	29,518

Table No. II. (*Continued*)—General Statistics.

BELLEVUE HOSPITAL.

Nativities of Patients Admitted.

1902.

	MEN.	WOMEN.	TOTAL.
United States.....	7,540	3,028	10,568
Canada	169	55	224
England	461	251	712
Scotland	174	76	250
Wales	10	8	18
Ireland	3,487	2,050	5,537
France.....	92	44	13
Germany.....	1,441	517	1,958
Italy.....	652	205	857
Austria	264	186	450
Switzerland ..	68	26	94
Sweden	188	71	259
Russia	378	285	663
West Indies	50	25	75
Other countries	563	328	891
Unknown	237	144	381
Total.....	15,774	7,299	23,073

Table No. II. (*Continued*)—General Statistics.

GOUVERNEUR HOSPITAL.

Nativities of Patients Admitted.

1902.

	MEN.	WOMEN.	TOTAL.
United States.....	822	316	1,138
Canada	11	3	14
England	46	23	69
Scotland	12	1	13
Wales.....	4	....	4
Ireland	253	125	378
France	4	....	4
Germany	126	36	162
Italy	71	28	99
Austria.....	142	76	218
Switzerland	8	1	9
Sweden	25	2	27
Russia	440	197	637
West Indies	5	....	5
Other countries.....	149	45	194
Unknown.....	9	5	14
Total	2,127	858	2,985

Table No. II. (Continued)—General Statistics.

HARLEM HOSPITAL.

Nativities of Patients Admitted.

1902.

	MEN.	WOMEN.	TOTAL.
United States.....	652	477	1,129
Canada	5	6	11
England	39	27	66
Scotland	10	7	17
Ireland.....	229	208	437
France.....	3	2	5
Germany.....	132	77	209
Italy.....	200	35	235
Austria.....	15	18	33
Switzerland.....	4	1	5
Sweden	11	13	24
Russia.....	23	37	60
West Indies.....	4	4	8
Other countries.....	39	47	86
Unknown	12	8	20
Total.....	1,378	967	2,345

Table No. II. (*Continued*)—General Statistics.

FORDHAM HOSPITAL.

Nativities of Patients Admitted.

1902.

	MEN.	WOMEN.	TOTAL.
United States.....	394	108	502
Canada.....	7	2	9
England.....	20	10	30
Scotland.....	2	2	4
Wales.....	3	....	3
Ireland.....	136	50	186
France.....	2	1	3
Germany.....	70	23	93
Italy.....	159	31	190
Austria.....	10	5	15
Switzerland.....	2	4	6
Sweden.....	10	6	16
Russia.....	11	5	16
Denmark.....	1	....	1
Norway.....	3	....	3
Hungary.....	1	5	6
Poland.....	1	1	2
Other countries.....	15	15	30
Total.....	847	268	1,115

TABLE No. III.—GENERAL STATISTICS.
BELLEVUE AND ALLIED HOSPITALS.

CONSOLIDATED STATEMENT.

Monthly Admissions, Discharges and Deaths.

1902.

	ADMISSIONS.			DISCHARGES.			DEATHS.		
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
January	1,711	798	2,509	1,554	718	2,272	151	71	222
February	1,496	673	2,169	1,376	622	1,998	130	47	177
March	1,689	835	2,524	1,591	755	2,346	115	59	174
April	1,762	784	2,546	1,586	699	2,285	137	66	203
May	1,749	851	2,600	1,663	783	2,446	131	74	205
June	1,551	735	2,286	1,491	700	2,191	114	58	172
July	1,645	833	2,478	1,489	751	2,240	124	79	203
August	1,655	825	2,480	1,515	747	2,262	112	80	192
September	1,517	716	2,233	1,401	669	2,070	137	73	210
October	1,652	815	2,467	1,476	713	2,189	140	67	207
November	1,796	769	2,565	1,616	692	2,308	131	59	190
December	1,903	758	2,661	1,759	736	2,495	137	65	202
Total	20,126	9,392	29,518	18,517	8,585	27,102	1,559	798	2,357

Table No. III. (Continued)—General Statistics.

BELLEVUE HOSPITAL.

Monthly Admissions, Discharges and Deaths.

1902.

	ADMISSIONS.			DISCHARGES.			DEATHS.		
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
January.	1,348	601	1,949	1,245	551	1,796	108	48	156
February.	1,161	528	1,689	1,080	502	1,582	92	28	120
March.	1,295	639	1,934	1,237	580	1,817	75	39	114
April.	1,388	601	1,989	1,260	548	1,808	91	46	137
May.	1,353	661	1,994	1,269	610	1,879	90	55	145
June.	1,217	569	1,786	1,195	556	1,751	74	33	107
July.	1,268	647	1,915	1,166	587	1,753	79	49	128
August.	1,271	647	1,918	1,178	593	1,771	72	55	127
September.	1,195	549	1,744	1,125	530	1,655	90	48	138
October.	1,301	641	1,942	1,178	565	1,743	91	31	146
November.	1,458	615	2,073	1,321	555	1,876	95	40	135
December.	1,539	601	2,140	1,440	581	2,021	106	47	153
Total ..	15,774	7,299	23,073	14,694	6,758	21,452	1,063	533	1,596

Table No. III. (Continued)—General Statistics.
 GOUVERNEUR HOSPITAL.
 Monthly Admissions, Discharges and Deaths.
 1902.

	ADMISSIONS.			DISCHARGES.			DEATHS.		
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
January	166	82	248	140	67	207	15	11	26
February	160	59	219	139	45	184	19	9	28
March	219	76	295	197	75	272	22	8	30
April	183	69	252	161	46	207	21	11	32
May	207	93	300	193	84	277	22	12	34
June	177	77	254	168	61	229	17	12	29
July	183	84	267	159	77	236	26	16	42
August	166	63	229	149	53	202	19	9	28
September	159	50	209	129	42	171	26	11	37
October	171	73	244	139	58	197	23	8	31
November	150	71	221	130	66	196	14	6	20
December	186	61	247	170	66	236	10	8	18
Total	2,127	858	2,985	1,874	740	2,614	234	121	355

Table No. III. (Continued)—General Statistics.

HARLEM HOSPITAL.

Monthly Admissions, Discharges and Deaths.
1902.

	ADMISSIONS.			DISCHARGES.			DEATHS.		
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
January	129	90	219	109	83	192	17	9	26
February	119	68	187	105	61	166	12	7	19
March	115	91	206	103	81	184	10	8	18
April	119	90	209	101	82	183	17	8	25
May	135	76	211	126	72	198	10	6	16
June	90	67	157	85	61	146	13	10	23
July	112	77	189	92	55	147	9	12	21
August	121	92	213	105	81	186	15	15	30
September	98	94	192	85	81	166	16	9	25
October	99	81	180	88	71	159	11	11	22
November	115	65	180	103	58	161	15	9	24
December	126	76	202	105	68	173	16	6	22
Total	1,378	967	2,345	1,207	854	2,061	161	110	271

Table No. III. (Continued)—General Statistics.

FORDHAM HOSPITAL.

Monthly Admissions, Discharges and Deaths.

1902.

	ADMISSIONS.			DISCHARGES.			DEATHS.		
	Male.	Female.	Total.	Male.	Female.	Total.	Male.	Female.	Total.
January	68	25	93	60	17	77	11	3	14
February	56	18	74	52	14	66	7	3	10
March	60	29	89	54	19	73	8	4	12
April	72	24	96	64	23	87	8	1	9
May	74	21	95	75	17	92	9	1	10
June	67	22	89	43	22	65	10	3	13
July	82	25	107	72	32	104	10	2	12
August	97	23	120	83	20	103	6	1	7
September	65	23	88	62	16	78	5	5	10
October	81	20	101	71	19	90	15	3	18
November	73	18	91	62	13	75	7	4	11
December	52	20	72	44	21	65	5	4	9
Total	847	268	1,115	742	233	975	101	34	135

TABLE No. IV.—GENERAL STATISTICS.

BELLEVUE AND ALLIED HOSPITALS.

CONSOLIDATED STATEMENT.

Ambulance, Police, Coroners' and Dressing Cases.

1902.

1902.	AMBULANCE.	POLICE CASES.	CORONERS' CASES.	DRESSING CASES.
January.....	1,238	107	73	545
February.....	1,074	104	56	445
March.....	1,236	85	60	537
April.....	1,195	102	67	603
May.....	1,319	123	68	649
June.....	1,227	114	75	792
July.....	1,401	98	68	1,019
August.....	1,355	117	71	845
September.....	1,176	118	78	729
October.....	1,234	103	63	658
November.....	1,188	127	65	773
December.....	1,231	102	75	605
Total.....	14,874	1,300	819	8,200

Table No. IV. (Continued)—General Statistics.

BELLEVUE HOSPITAL.

Ambulance, Police, Coroners' and Dressing Cases.

1902.	AMBULANCE.	POLICE CASES.	CORONERS' CASES.	DRESSING.
January	514	88	46	307
February	478	86	38	259
March	523	72	36	323
April	481	85	40	361
May	542	103	45	380
June	493	94	44	492
July	539	85	43	605
August	522	101	34	559
September	438	96	38	459
October	508	93	34	418
November	482	108	36	501
December	498	88	41	335
Total	6,018	1,099	475	4,999

Table No. IV. (Continued)—General Statistics.

GOUVERNEUR HOSPITAL.

Ambulance, Police, Coroners' and Dressing Cases.

1902.	AMBULANCE.	POLICE CASES.	CORONERS' CASES.	DRESSING CASES.
January	292	....	13	34
February	252	....	9	40
March	328	1	13	57
April	314	2	17	63
May	342	3	11	70
June	355	1	16	61
July	388	2	13	101
August	347	5	15	85
September	324	4	21	74
October	334	1	12	89
November	321	....	17	73
December	323	....	17	69
Total	3,920	19	174	816

Table No. IV. (Continued)—General Statistics.

HARLEM HOSPITAL.

Ambulance, Police, Coroners' and Dressing Cases.

	AMBULANCE.	POLICE CASES.	CORONERS' CASES.	DRESSING CASES.
January.....	309	19	9	153
February.....	222	16	6	125
March.....	262	12	3	123
April.....	273	15	6	164
May.....	290	16	6	183
June.....	267	19	10	205
July.....	331	10	8	258
August.....	358	11	17	186
September.....	312	18	16	182
October.....	268	8	10	140
November.....	292	19	9	191
December.....	286	14	14	194
Total.....	3,470	177	114	2,105

Table No. IV. (*Continued*)—General Statistics.

FORDHAM HOSPITAL.

Ambulance, Police, Coroners' and Dressing Cases.

1902.	AMBULANCE.	POLICE CASES.	CORONERS' CASES.	DRESSING CASES.
January.....	123	..	5	51
February.....	122	2	3	21
March.....	123	..	8	34
April.....	127	..	4	15
May.....	145	1	6	16
June.....	112	..	5	33
July.....	143	1	4	55
August.....	128	..	5	15
September.....	102	..	3	14
October.....	124	1	7	11
November.....	93	..	3	8
December.....	124	..	3	7
Total.....	1,466	5	56	280

TABLE No. V.—GENERAL STATISTICS.

DISPENSARIES.

BELLEVUE AND ALLIED HOSPITALS.

CONSOLIDATED STATEMENT.

Visits.

1902.

January	21,837
February	17,132
March	21,161
April	22,794
May	22,344
June	22,480
July	25,078
August	25,243
September	21,062
October	22,767
November	18,878
December	16,789
	<hr/>
	257,565
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BELLEVUE HOSPITAL.

DISPENSARY REPORT.

1902.

Visits.

January	12,390
February	9,451
March	11,426
April	11,859
May	11,688
June	11,243
July	12,567
August	12,924
September	11,388
October	12,288
November	9,834
December	8,503

 135,561

GOUVERNEUR HOSPITAL.

DISPENSARY REPORT.

1902.

Visits.

January	3,908
February	3,069
March	4,510
April	4,735
May	4,991
June	5,418
July	6,545
August	6,311
September	5,084
October	4,878
November	4,276
December	3,950

 57,675

HARLEM HOSPITAL.

DISPENSARY REPORT.

1902.

Visits.

January	4,864
February	4,129
March	4,722
April	5,565
May	5,139
June	5,109
July	5,285
August	5,311
September	4,016
October	5,087
November	4,525
December	4,153
	<hr/>
	57,905
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FORDHAM HOSPITAL.

DISPENSARY REPORT.

1902.

Visits.

January	675
February	483
March	503
April	635
May	526
June	710
July	681
August	697
September	574
October	514
November	243
December	183
	<hr/>
	6,424
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TABLE No. VI.—GENERAL STATISTICS.

BELLEVUE HOSPITAL.

MATERNITY.

Emergency Hospital.

	MALE.	FEMALE.	TOTAL.
Number of patients remaining in hospital, December 31, 1901.....	....	12	12
Number of babies remaining in hospital, December 31, 1901.....	3	3	6
Number admitted during the year.....	....	204	204
Number of births.....	97	95	192
Number of still births.....	9	4	13
	109	318	427
Number of deaths of mothers.....	....	1	1
Number of deaths of babies.....	5	7	12
Number of patients discharged.....	....	202	202
Number of babies discharged.....	92	87	179
Number of still births.....	9	4	13
Number of patients remaining in Hospital, December 31, 1902.....	....	13	13
Number of babies remaining in hospital, December 31, 1902.....	3	4	7
Total.....	109	318	427

The above statistics are included in those of Bellevue Hospital, but are here given separately for the purpose of showing this special maternity work.

TABLE No. VII.—GENERAL STATISTICS.

BELLEVUE HOSPITAL.

Pavilion for Insane.

1902.

	MEN.	WOMEN.	TOTAL.
Number of patients remaining in hospital December 31, 1901.....	17	22	39
Admitted during 1902.....	1,218	1,145	2,363
Total.....	1,235	1,167	2,402
Committed to Manhattan State Hospital.....	729	826	1,555
Committed to Private Institutions.....	35	31	66
Transferred to General Wards.....	110	54	164
Transferred to other institutions.....	41	43	84
Discharged.....	272	184	456
Died.....	34	22	56
Total.....	1,221	1,160	2,381
Remaining in hospital December 31, 1902.....	14	7	21
Total.....	1,235	1,167	2,402

TABLE No. VIII.—GENERAL STATISTICS.

BELLEVUE HOSPITAL.

Alcoholic Wards.

1902.

	MALES.		FEMALES.	
	Admitted.	Died.	Admitted.	Died.
January.....	335	7	132	2
February.....	272	6	96	....
March.....	318	5	131	2
April.....	389	8	125	2
May.....	356	7	136	4
June.....	324	9	114	1
July.....	326	5	112	1
August.....	360	7	110	2
September.....	344	8	120	2
October.....	372	12	134	2
November.....	471	4	127	5
December.....	514	12	112	7
Total.....	4,381	90	1,449	30

TABLE No. IX.—GENERAL STATISTICS.
 BELLEVUE AND ALLIED HOSPITALS.
Consolidated Statement of Expenses for 1902.

	BELLEVUE.	GOUVERNEUR.	HARLEM.	FORDHAM.	TOTAL.
Provisions	\$106,215 67	\$14,568 46	\$9,785 13	\$8,655 70	\$139,224 96
Clothing and bedding	30,403 89	465 94	330 26	663 38	31,863 47
Drugs and liquors	40,396 39	5,461 02	4,095 58	2,791 21	52,744 20
Surgical instruments	4,880 19	711 39	486 51	319 32	6,397 41
Fuel	19,659 12	6,114 40	924 86	1,272 50	27,970 88
Salaries	108,518 26	14,040 51	7,357 91	7,088 87	137,005 55
Additions, alterations and repairs to buildings and apparatus, new ambulances, hoises, harness and repairs, miscel- laneous	110,084 81	10,596 14	7,808 80	8,490 25	136,980 00
Departmental salaries .....	.....	.....	.....	.....	6,656 23
Total	\$420,158 33	\$51,957 86	\$30,789 05	\$29,281 23	\$538,842 70
Daily average number of patients	740	80	35	39	894
Daily per capita cost, based on expenditures for eleven months....	\$1 69 plus	\$1 94	\$2 63	\$2 24	\$1 81
Deducting from total expenses the sum of \$100,678.48, which represents alterations, improvements, cost of maintaining dispensary, departmental and other extraordinary expenses, we have a daily per capita cost of	1 39	1 65	2 04	1 97	1 47

BELLEVUE HOSPITAL.

Expenses for 1902.

Provisions	\$106,215.67
Clothing and Bedding	30,403.89
Drugs and Liquors	40,396.39
Surgical Instruments	4,880.19
Fuel	19,659.12
Salaries	108,518.26
Additions, Alterations and Repairs to Buildings and Apparatus; New Ambulances, Horses, Harness and Repairs; Miscellaneous	110,084.81
	<hr/>
	\$420,158.33
	<hr/>

Daily average number of patients	740
Daily per capita cost, based on expenditures for eleven months	\$1.69 plus
Deducting from total expenses the sum of \$75,836.14, which represents Alterations, Improvements, Cost of Maintaining Dispen- sary, and other extraordinary expenses, we have a daily per capita cost of	\$1.39
	<hr/>

GOUVERNEUR HOSPITAL.

Expenses for 1902.

Provisions	\$14,568.46
Clothing and Bedding.....	465.94
Drugs and Liquors.....	5,461.02
Surgical Instruments	711.39
Fuel	6,114.40
Salaries	14,040.51
Additions, Alterations and Repairs to Buildings and Apparatus; New Ambulances, Horses. Harness and Repairs; Miscellaneous.....	10,596.14
	<hr/>
	\$51,957.86
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Daily average number of patients.....	80
Daily per capita cost, based on expenditures for eleven months	\$1.94
Deducting from total expenses the sum of \$7,704.73, which represents Alterations, Improvements, Cost of Maintaining Dispen- sary, and other extraordinary expenses, we have a daily per capita cost of.....	\$1.65
	<hr/> <hr/>

HARLEM HOSPITAL.

Expenses for 1902.

Provisions	\$9,785.13
Clothing and Bedding	330.26
Drugs and Liquors	4,095.58
Surgical Instruments	486.51
Fuel	924.86
Salaries	7,357.91
Additions, Alterations and Repairs to Buildings and Apparatus; New Ambulances, Horses, Harness and Repairs; Miscellaneous	7,808.80

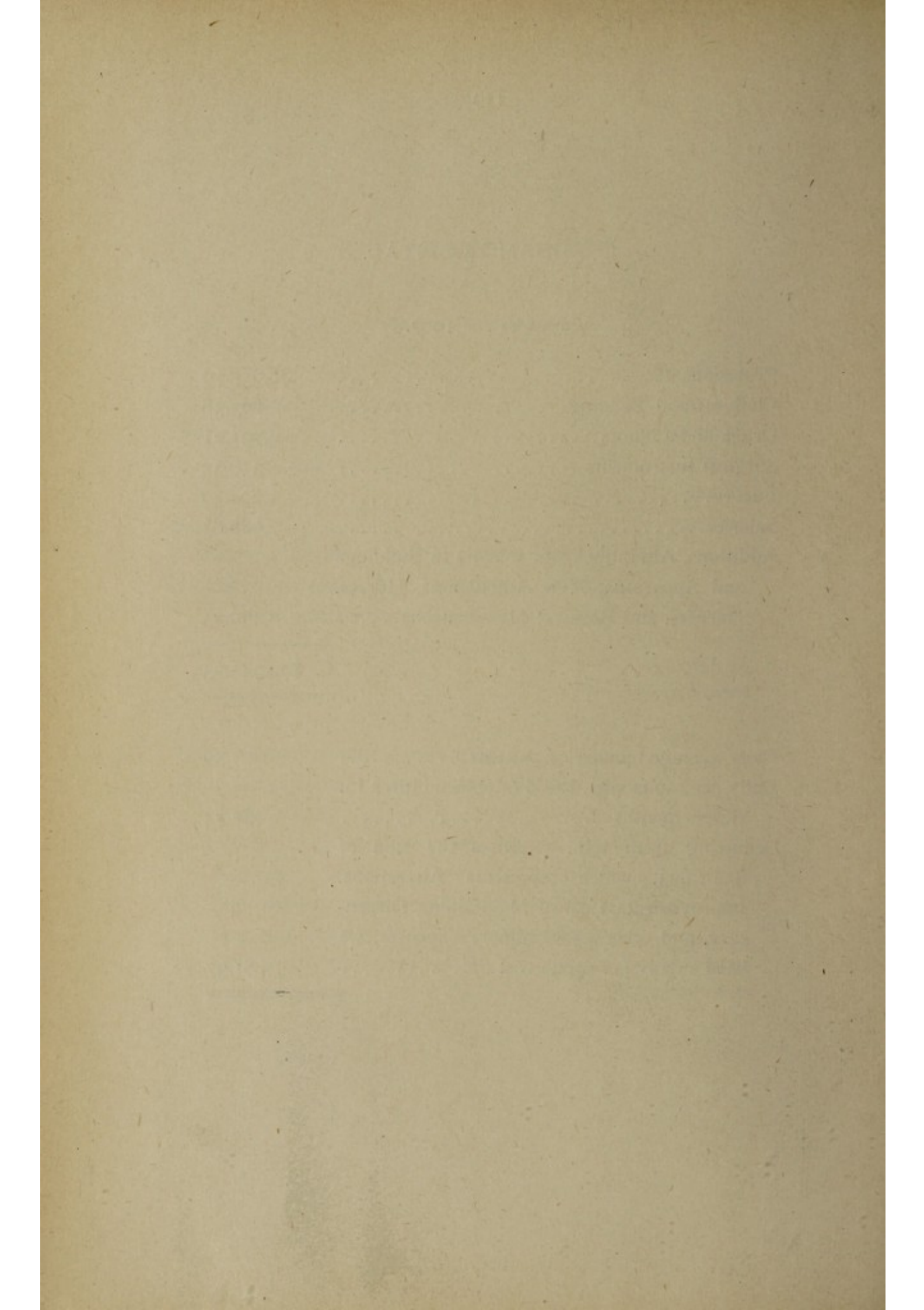
\$30,789.05

Daily average number of patients	35
Daily per capita cost, based on expenditures for eleven months	\$2.63
Deducting from total expenses the sum of \$6,869.15, which represents Alterations, Improvements, Cost of Maintaining Dispen- sary, and other extraordinary expenses, we have a daily per capita cost of	\$2.04

FORDHAM HOSPITAL.

Expenses for 1902.

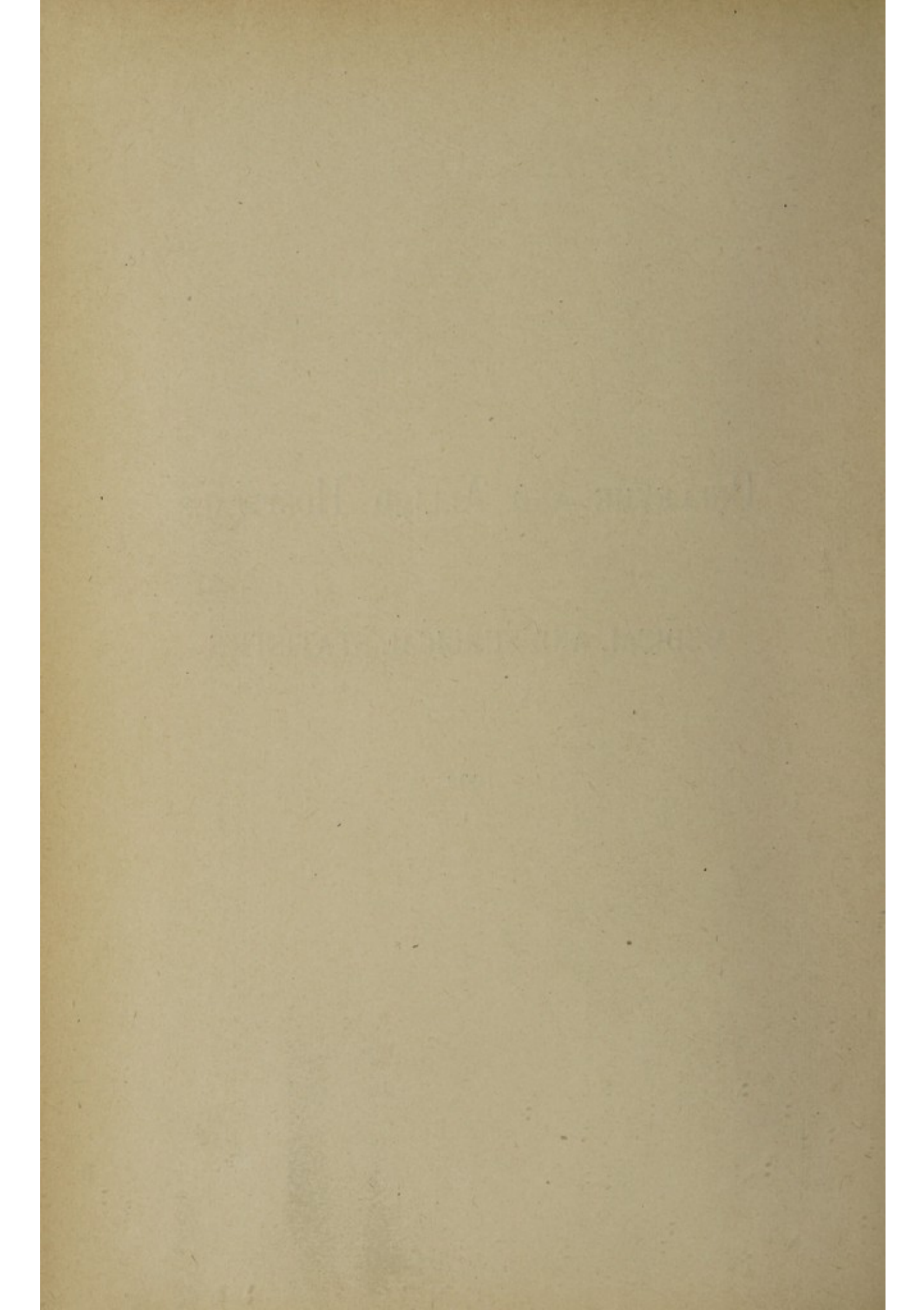
Provisions	\$8,655.70
Clothing and Bedding.....	663.38
Drugs and Liquors.....	2,791.21
Surgical Instruments	319.32
Fuel	1,272.50
Salaries	7,088.87
Additions, Alterations and Repairs to Buildings and Apparatus; New Ambulances, Horses, Harness, and Repairs; Miscellaneous.....	8,490.25
	<hr/>
	\$29,281.23
	<hr/>
Daily average number of patients.....	39
Daily per capita cost, based on expenditures for eleven months	\$2.24
Deducting from total expenses the sum of \$3,612.23, which represents Alterations, Improvements, Cost of Maintaining Dispen- sary, and other extraordinary expenses, we have a daily per capita cost of	\$1.97
	<hr/>



BELLEVUE AND ALLIED HOSPITALS

MEDICAL AND SURGICAL STATISTICS

1902



To the Board of Trustees, Bellevue and Allied Hospitals:

GENTLEMEN: I have the honor to submit to you the Medical Statistics of Bellevue and Allied Hospitals.

These were prepared in pursuance of the request of the Board of Trustees by the Committee of Medical Statistics of Bellevue Hospital, Drs. Carlisle, Coleman, Dow and T. A. Smith.

Sincerely yours,

ALEXANDER LAMBERT,

Secretary, Medical Board.

TABLE No. I.—MEDICAL STATISTICS.

BELLEVUE HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Medical.

Abortion, threatened.....	18	Elbow, disease unclassified	2
Alcoholism	5,692	Hip, disease unclassified..	2
Amenorrhea, unclassified....	2	Knee, disease unclassified..	4
Anemia, unclassified.....	33	Wrist, disease unclassified..	2
Aneurism, aorta.....	11	Asphyxia, unclassified.....	4
Angina pectoris.....	2	Asthma, unclassified.....	50
Aphasia, unclassified.....	9	Atrophy, progressive muscu-	
Arterio-sclerosis	78	lar	1
Arthritis—		Bronchitis—	
Rheumatic, location un-		Acute.	182
classified.	15	Chronic	66
Syphilitic, unclassified....	12	Carcinoma—	
Tubercular, unclassified...	9	Liver	5
Ankle, disease unclassified.	5	Stomach	12

Lungs	1	Gout	43
Cephalalgia	14	Heart, acute dilatation of...	3
Cerebral embolism.....	4	Hematemesis	2
Cerebral hemorrhage.....	95	Hemoptysis	2
Cerebral thrombosis.....	6	Heat exhaustion.....	45
Chorea	11	Hematomyelia	1
Cirrhosis, liver.....	65	Hodgkin's disease.....	7
Colic—		Hydrocephalus	1
Biliary	7	Hydropneumothorax	2
Intestinal	15	Hysteria.	58
Lead	4	Idiocy	11
Renal	5	Inanition	13
Colitis, unclassified.....	51	Incontinency of urine.....	12
Conjunctivitis, unclassified...	4	Infancy	365
Constipation	142	Influenza	83
Croup	2	Insanity.....	1,586
Dermatitis, unclassified.....	2	Insanity, mental examination	599
Destitution	40	Insomnia	3
Diabetes—		Laryngitis—	
Insipidus	11	Acute	10
Mellitus	2	Chronic	4
Diphtheria	16	Lead poisoning, chronic....	16
Eclampsia	6	Leukemia	1
Elephantiasis	1	Locomotor ataxia.....	32
Emphysema.	68	Marasmus	11
Empyema.	24	Masturbation	3
Endocarditis, chronic.....	240	Measles	10
Enteritis—		Meningitis	10
Acute	42	Cerebro-spinal	1
Gastro	127	Chronic	2
Epilepsy	159	Monoplegia—	
Epistaxis	21	Unclassified	3
Fever—		Arm	6
Malarial, unclassified.....	207	Leg	4
Scarlet	9	Morphine habit.....	59
Typhoid	103	Myelitis	20
Gastralgia	3	Myocarditis	87
Gastritis—		Nephritis—	
Acute	146	Acute	143
Chronic.	62	Chronic	179
Goitre, exophthalmic.....	1	Neuralgia, unclassified	10

Sciatic	35	Gas	52
Neurasthenia	145	Iodoform	2
Neuritis, peripheral	64	Mercury	3
Neuroma	1	Opium	10
Obesity	1	Rhustoxychodendron	4
Paralysis, agitans	10	Ptomaine	2
Paraplegia, unclassified	18	Tobacco	1
Parturition	84	Pregnancy	139
Pericarditis, chronic	1	Rachitis	3
Peritonitis, tubercular	5	Rheumatism—	
Pharyngitis	16	Acute, articular	457
Pleuritis—		Chronic, unclassified	124
Acute	57	Muscular	79
Chronic	31	Senility	95
With effusion	50	Stomatitis, unclassified	8
Pneumonia—		Strangulation	1
Lobar	158	Submersion	16
Broncho	55	Syncope, unclassified	9
Pneumo-thorax	1	Syphilis, cerebral	10
Poisoning—		Tenia, unclassified	4
Ammonia	3	Tonsilitis	48
Arsenic	1	Tuberculosis, pulmonary....	898
Atropin	1	Ulcer, gastric	14
Benzine	3	Varicella	1
Carbolic acid	35		
Cocaine	6		
Chloral	2		14, 142

GOUVERNEUR HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Medical.

Adhesion, knee, pneumatic..	1	Anemia	1
Alcoholism—		Aneurism of aorta.....	1
Acute	184	Angina pectoris	1
Chronic	58	Asthenia	17

Ataxia, hereditary	1	Chronic	7
Auto-intoxication	4	Toxic	1
Bronchitis—		Goitre	1
Acute	33	Exophthalmic	1
Chronic	17	Gout	3
Catalepsy	1	Heat prostration	3
Cerebral embolism	1	Hiccough	1
Hemorrhage	22	Hodgkin's disease	1
Thrombosis	1	Hydrocephalus	1
Chorea	1	Hypochondriasis	1
Cirrhosis of liver.....	7	Hysteria	37
Colic—		Impaction, fecal	1
Intestinal	17	Infancy	20
Lead	2	Insanity	8
Constipation—		Influenza	9
Acute	30	Laryngitis, syphilitic	2
Chronic	17	Liver, functional derange-	
Convulsions, infantile	1	ment	1
Debility	1	Locomotor ataxia	1
Dementia	14	Lymphadenitis, tubercular..	1
Destitution	3	Malingering	5
Diabetes mellitus	1	Marasmus	3
Dilatation of heart.....	1	Measles	3
Diphtheria	3	Melancholia	5
Dysentery	8	Meningitis—	
Dyspepsia	29	Cerebro-spinal	2
Emphysema, pulmonary ...	7	Tubercular	1
Endocarditis—		Migraine	1
Acute	11	Myelitis, transverse	1
Chronic	15	Myocarditis	2
Enteritis—		Nephritis—	
Acute	14	Acute	4
Gastro-	44	Chronic	29
Epilepsy	34	Nephrolithiasis	1
Encephalitis	1	Neuralgia	3
Fever—		Intercostal	2
Malarial	45	Sciatic	10
Typhoid	40	Neurasthenia	7
Gastralgia	1	Neuro-fibroma	1
Gastritis—		Pachymeningitis	1
Acute	19	Paralysis agitans	1

Peritonitis, tubercular	3	Rachitis	2
Pharyngitis	2	Rheumatism—	
Pleuritis—		Acute	70
Acute	14	Sub-acute	48
Sub-acute	18	Chronic	57
Pneumonia—		Muscular	36
Lobar	65	Scarlatina.	6
Broncho-	29	Scurvy	3
Poisoning—		Senility	23
Carbolic acid	11	Starvation	1
Ammonia	1	Submersion	21
Arsenic	4	Syncope	5
Camphorated oil	1	Tenia	2
Gas	15	Tonsillitis	12
Lead	8	Tuberculosis, pulmonary ...	98
Roach powder	1	Ulcer, gastric	2
Strychnine	1	Varicella	2
Tobacco	1	Variola	3
Opium	1	Vesiculæ tubercular	1
Pregnancy	9	Whooping cough	3
Purpura—			
Rheumatic	1		
Simple	1		
			1,472

HARLEM HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Medical.

Abortion—		Arthritis, gonorrheal.....	5
Complete	21	Asthma	1
Incomplete	4	Bronchitis—	
Threatened	9	Acute	34
Alcoholism	147	Chronic	5
Aphasia, unclassified	2	Sub-acute	2
Apoplexy, cerebral	7	Cardiac, acute dilatation....	2
Arterio-sclerosis	3	Caisson disease.....	2

Chlorosis	1	Marasmus	2
Chorea	1	Migraine	3
Cirrhosis of liver.....	5	Myelitis—	
Colic, intestinal.....	1	Chronic	1
Colitis.	5	Transverse	1
Entero-	1	Myocarditis	4
Constipation	19	Nephritis—	
Dementia	15	Unclassified	22
Destitution	6	Chronic	9
Disseminated sclerosis.....	1	Peripheral	4
Diarrhea	2	Neurasthenia	2
Diabetes	1	Neuralgia	5
Diphtheria	6	Paralysis agitans.....	1
Dyspepsia	1	Unclassified	3
Dysentery	2	Paraplegia	1
Eclampsia, puerperal.....	3	Pharyngitis	1
Emphysema	1	Poisoning—	
Enteritis	1	Arsenic	1
Gastro-	5	Chloral	1
Encephalitis	1	Carbolic acid.....	8
Endocarditis, unclassified...	28	Caustic potash.....	1
Epilepsy	15	Creosote	2
Fever—		Delphine	1
Typhoid	14	Gas	15
Malarial	16	Hydrochloric acid.....	2
Gastralgia	2	Lead	2
Gastritis—		Morphine	2
Acute	18	Opium.	2
Chronic	2	Phosphorus	2
Hemoptysis	2	Pregnancy	103
Heat exhaustion.....	1	Vomiting	2
Hemiplegia, unclassified....	3	Pleurisy with adhesion.....	1
Hysteria	13	With effusion.....	13
Hydrocephalus	1	Pneumonia—	
Hypochondriasis	1	Broncho-	11
Infancy (children born in		Lobar	42
hospital)	61	Rheumatism—	
Insanity	128	Acute, articular.....	67
Influenza	10	Chronic, unclassified.....	13
Laryngitis, syphilitic.....	2	Muscular	5
Locomotor ataxia.....	4	Senility	12

Submersion	8	Variola	8
Tonsillitis, follicular.....	6	Varicella	2
Tuberculosis, pulmonary....	88		
Urticaria	1	Total	1,123

FORDHAM HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Medical.

Abortion—		Fever—	
Complete	1	Malarial	108
Threatened	5	Typhoid	9
Arterio-sclerosis	7	Gastritis	2
Asphyxiation, gas.....	4	Hysteria	8
Alcoholism	65	Hodgkin's disease.....	1
Angina pectoris.....	3	Hemiplegia, unclassified....	6
Births in hospital.....	4	Insanity	6
Bronchitis	34	Influenza	2
Cirrhosis of liver.....	1	Insolation	1
Colitis, unclassified.....	2	Jaundice, unclassified.....	3
Chorea	3	Laryngitis	1
Cystitis	4	Locomotor ataxia.....	2
Conjunctivitis	3	Marasmus	2
Constipation	1	Meningitis, tubercular.....	2
Diabetes	4	Melancholia	7
Epilepsy	15	Nephritis, acute.....	9
Jacksonian	1	Neuritis	2
Endocarditis—		Neuralgia	4
Acute	4	Neurasthenia	2
Chronic	2	Pneumonia—	
Erysipelas	4	Lobar	21
Epistaxis	2	Broncho-	2
Emphysema	1	Pericarditis	4

Pleurisy	8	Submersion	4
With effusion.....	2	Scarlatina	1
Paresis	2	Tuberculosis	21
Poisoning—		Tonsillitis	1
Carbolic	1	Vertigo	1
Lead	2	Whooping cough.....	1
Ptomaine	1		
Pregnancy	11		
Rheumatism, unclassified...	59	Total	489

TABLE No. II.—MEDICAL STATISTICS.

BELLEVUE HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Medical.

Abscess of lung.....	3	Epilepsy	1
Alcoholism	102	Gastro-enteritis	42
Addison's disease.....	2	Gangrene of lung.....	3
Anemia, chronic, splenic...	1	Gout, chronic.....	1
Aneurism of aorta.....	6	Hydrophobia	1
Subclavian	1	Hematomyelia	1
Arterio-sclerosis	30	Malaria, æstivo-autumnal...	1
Amyotrophic lateral sclero-		Mania, acute.....	17
sis	2	Marasmus	67
Birth, premature.....	15	Meningitis—	
Bronchitis, chronic.....	2	Purulent	26
Carcinoma—		Cerebro-spinal	7
Multiple	1	Tubercular	13
Liver	9	Morphinism, chronic.....	1
Lung	1	Nephritis—	
Pancreas	2	Acute	11
Stomach	26	Chronic	137
Cerebral embolism.....	6	Neuritis, multiple.....	2
Hemorrhage	57	Pancreatis, suppurative....	1
Thrombosis	4	Paresis	10
Cirrhosis of liver.....	30	Pericarditis	2
Colitis—		Tubercular	1
Acute ulcerative.....	1	Peritonitis, tubercular.....	5
Chronic	3	Pneumonia—	
Dementia	6	Acute, lobar.....	141
Diabetes	10	Broncho-	41
Diphtheria	3	Acute, tubercular.....	1
Eclampsia, puerperal.....	3	Poisoning—	
Endocarditis—		Arsenic	8
Chronic, unclassified.....	86	Carbolic acid.....	9
Congenital	2	Illuminating gas.....	16
Infective	3	Hydrochloric acid.....	2

Morphine, acute.....	2	Thrombosis, pulmonary, ar-	
Pyopneumothorax	3	tery	1
Rheumatism, acute, articular	1	Tuberculosis—	
Sarcoma—		Acute, general, miliary....	4
Stomach	1	Pulmonary	291
Mediastinum and sternum.	1	Typhoid fever.....	19
Scorbutus	1	Ulcer of stomach.....	1
Submersion	3		
Tabes dorsalis.....	2	Total	1,315

GOUVERNEUR HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Medical.

Alcoholism	18	Tubercular	5
Asphyxia	1	Myelitis, transverse.....	1
Colitis	5	Myocarditis	1
Cirrhosis of liver.....	3	Nephritis, unclassified.....	40
Croup	1	Œdema glottidis.....	1
Cardiac asthenia.....	1	Paresis	1
Cerebral hemorrhage.....	17	Peritonitis, tubercular.....	1
Œdema	2	Pneumonia—	
Dementia	1	Lobar	35
Diabetes mellitus.....	1	Broncho-	12
Eclampsia	1	Traumatic	1
Empyema	6	Poisoning—	
Endocarditis—		Ammonia	1
Acute	3	Carbolic acid.....	4
Chronic	17	Gas	5
Enteritis—		Lead	2
Acute	6	Ptomaine	1
Gastro-	8	Unknown	1
Fever, typhoid.....	5	Rachitis	2
Gastritis, toxic.....	1	Scarlatina	1
Inanition	1	Stillborn	2
Marasmus	11	Tuberculosis, pulmonary....	21
Meningitis	3		
Cerebro-spinal	2		
Septic	1	Total	253

HARLEM HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Medical.

Abortion and peritonitis....	1	Meningitis—	
Addison's disease.....	1	Cerebro-spinal	7
Alcoholism	11	Tubercular	4
Arterio-sclerosis	2	Nephritis	28
Atelectasis of lung.....	10	Edema, pulmonary, causa-	
Cardiac, acute, dilatation...	7	tion undetermined.....	4
Caisson disease.....	1	Poisoning—	
Cerebral embolism.....	1	Arsenic	2
Hemorrhage	3	Carbolic acid.....	2
Cholemia	1	Gas	1
Cirrhosis of liver.....	1	Hydrochloric acid.....	1
Colitis—		Opium	1
Entero	3	Pneumonia—	
Chronic	1	Broncho-	4
Dysentery	1	Lobar	24
Eclampsia, puerperal.....	2	Septicemia post abortion...	1
Enteritis, gastro-	2	Tuberculosis—	
Endocarditis—		Acute, miliary.....	2
Chronic	10	Pulmonary	11
Infective	1		
Fever, typhoid.....	7		
Hydrocephalus	1	Total	159

FORDHAM HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Medical.

Arterio-sclerosis	4	Diabetes	1
Alcoholism	10	Eclampsia	1
Cerebral hemorrhage.....	6	Endocarditis, chronic.....	7
Cirrhosis of liver.....	3	Fever, typhoid.....	5

Insolation	1	Creosote	1
Meningitis—		Carbolic acid	1
Tubercular	1	Pneumonia—	
Septic	1	Lobar	6
Cerebro-spinal	1	Broncho-	3
Marasmus	1	Premature birth.....	1
Membranous croup.....	1	Rachitis	1
Nephritis	4	Tuberculosis—	
Chronic	10	Acute, miliary.....	8
Poisoning—		Pulmonary	5
Paris green.....	2		
Strychnine	1	Total	86

TABLE No. III.—SURGICAL STATISTICS.

BELLEVUE HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Surgical and Gynecological.

Abortion—		Urethral.	20
Complete	44	Vesico-vaginal	2
Incomplete	38	Vulvo-vaginal	21
Abscess—		Tubercular, unclassified as	
Abdominal wall.....	3	to location.....	5
Alveolar	14	Adenitis—	
Arm	6	Axillary.	8
Axillary	10	Cervical	21
Back	1	Inguinal	116
Breast	5	Amputation, traumatic—	
Cervical	11	Fingers	22
Face	4	Arms	2
Finger	2	Legs	7
Foot	3	Toes	6
Hand	2	Ankylosis—	
Ischio-rectal	75	Ankle	2
Jaw	13	Elbow	9
Knee	3	Hip	3
Legs	13	Jaw	1
Liver	3	Knee	1
Lungs	1	Wrist	1
Ovarian	1	Appendicitis	62
Pelvic	22	Arthritis, gonorrheal, un-	
Perineal	10	classified	51
Psoas	4	Artificial anus operation....	2
Rectal	13	Burns—	
Scalp	1	General	65
Scrotal	2	Arms	12
Shoulder	1	Arms and hands.....	1
Thigh	2	Arms and legs.....	2

Back	1	Spine	5
Body	7	Condylomata	18
Buttocks	2	Contusions—	
Face	17	General	57
Face and hands.....	8	Ankle	10
Feet	17	Arms	12
Hands	12	Back	64
Knees	2	Body	54
Legs	13	Chest	23
Neck	2	Elbow	12
Bursitis—		Eye	9
Elbow	7	Foot	12
Foot	1	Face	23
Knee	12	Hand	19
Carbuncle	15	Head	16
Carcinoma—		Hip	64
Breast	21	Jaw	5
Face	4	Knee	30
Jaw	4	Leg	57
Finger	1	Scrotum	3
Neck	8	Shoulder	28
Esophagus	1	Spine	3
Omentum	2	Testicle	7
Rectum	5	Abdomen	6
Tongue	2	Crushed feet.....	4
Uterus	41	Hands	6
Cellulitis—		Toes	5
Pelvic	3	Cut throat.....	8
Arm	26	Cystitis	35
Face	5	Cystocele	3
Foot	28	Dislocation—	
Hand	23	Ankle joint.....	4
Knee	4	Astragulus	3
Leg	60	Clavicle	2
Neck	12	Elbow joint.....	5
Chancroids	117	Hip	3
Cicatrix (contraction of		Knee joint.....	3
hand)	2	Shoulders	54
Cleft palate.....	2	Fingers	3
Concussion—		Dysmenorrhea unclassified..	32
Brain	31	Ectopic gestation.....	4

Eczema—		Nasal bone.....	14
Arms	19	Olecranon process.....	7
Legs	10	Os calcis.....	11
Scalp	8	Patella.....	22
Endometritis, unclassified...	90	Pelvis	4
Epididymitis	139	Pott's	195
Epithelioma—		Ribs	125
Face	6	Radius	23
Jaw	2	Skull	22
Leg	2	Base, skull.....	15
Lip	11	Spine	1
Tongue	3	Tibia, simple.....	94
Erysipelas—		Tibia and fibula, simple...	145
Facial	403	Toes	2
Arm	25	Ulna, shaft.....	13
Foot	16	Compound:	
Leg	49	Femur	10
Exostosis unclassified.....	4	Fibula	1
Fibroma—		Skull	9
Axilla	5	Tibia	16
Cervical	2	Tibia and fibula.....	9
Fistula in ano.....	89	Frost bite—	
Perineal	3	Hands	2
Urethral	7	Feet	5
Vesico-vaginal	3	Gangrene—	
Floating kidney.....	14	Feet	10
Foreign body in knee joint..	1	Penis	2
Fracture—		Stump of leg.....	2
Clavicle	41	Finger	2
Simple of wrist (Colles)..	55	Toe	2
Femur (neck).....	196	Genu valgum.....	16
Femur (shaft).....	3	Varum	2
Fibula, simple.....	38	Gonorrhea	176
Humerus	86	Hematoma, scalp.....	4
Ilium	9	Hare lip.....	4
Fractures—		Hematocoele	1
Maxilla (inferior).....	44	Hemorrhage, urethral.....	3
Maxilla (superior).....	7	Hemorrhoids	156
Maleolus, unclassified.....	3	Hernia—	
Metacarpus	5	Femoral	7
Metatarsus	21	Inguinal	194

Strangulated	9	Pemphigus	1
Umbilical	10	Peritonitis—	
Strangulated	3	Acute, general.....	4
Ventral	26	Local, pelvic.....	3
Strangulated	1	Chronic	1
Hallux valgus.....	9	Periostitis, unclassified.....	17
Hydrocele	38	Pes planus.....	19
Hypospadias	4	Phlebitis, unclassified.....	10
Hammer toes.....	6	Phimosis	32
Intestinal obstruction.....	8	Prolapsus—	
Lacerated cervix.....	14	Rectum	8
Cervix and perineum....	60	Uterus	18
Lipoma	3	Prostate, hypertrophy of...	16
Lupus	1	Psoriasis	1
Lymphangitis	1	Pyæmia	3
Mastitis	19	Prostatitis	16
Mastoiditis	9	Pyelitis	2
Metritis	2	Retention of urine, unclassified	27
Necrosis—		Ruptured urethra.....	6
Femur	3	Salpingitis, unclassified.....	112
Finger	1	Salpingo oophoritis.....	7
Foot	5	Sarcoma—	
Humerus	2	Arm	2
Jaw	3	Foot	1
Nasal bone.....	1	Jaw	3
Radius	1	Thigh	1
Ribs	2	Uterus	3
Fibia	2	Kidney	4
Toes	1	Scabies	5
Ulna	1	Septicæmia—	
Ophthalmia, unclassified....	5	Unclassified	1
Orchitis	12	Puerperal	6
Osteo-myelitis—		Shock	4
Femur	20	Sinuses, unclassified.....	19
Tibia	13	Sprain—	1
Otitis media.....	9	Ankle	188
Osteitis, tubercular, unclassified	7	Arm	2
Ovarian cyst.....	18	Back	9
Ovaritis	4	Knee	22
Paraphimosis	12	Leg	6

Shoulder	5	Leg	252
Wrist	6	Thumb	4
Stricture—		Uterus—	
Esophagus	5	Cervical hypertrophy.....	5
Urethra	96	Fibroid of.....	34
Rectum	3	Retroflexion of.....	30
Synovitis—		Retroversion of.....	33
Ankle	13	Sub-involution of.....	3
Knee	64	Urethritis, unclassified.....	22
Elbow	1	Vaginitis	16
Syphilis	181	Varicocoele	67
Talipes—		Varicose veins.....	57
Unclassified	4	Vesicle calculus.....	14
Varus	4	Vulvitis	1
Tubercular ankle.....	8	Wounds—	
Arm	2	Scalp, unclassified..	243
Elbow	6	Hand, incised.....	9
Finger	2	Arm, lacerated.....	10
Foot	7	Ear, lacerated.....	10
Glands of neck.....	14	Eye, lacerated.....	11
Hip	18	Face, lacerated.....	42
Knee	17	Foot, lacerated.....	23
Rectum	1	Hand, lacerated.....	31
Spine (Pott's disease)....	9	Knee, lacerated.....	4
Testicle	11	Leg, lacerated.....	17
Wrist	2	Scrotum, lacerated.....	4
Tumor—		Arm, infected.....	4
Ankle, unclassified.....	1	Chest, infected.....	2
Brain	5	Face, infected.....	5
Breast	1	Foot, infected.....	28
Ear	1	Hand, infected.....	27
Jaw	2	Head, infected.....	4
Knee	1	Knee, infected.....	8
Groin	1	Leg, infected.....	9
Neck	2	Abdomen, gunshot.....	4
Shoulder	3	Arm, gunshot.....	3
Thigh	5	Back, gunshot.....	2
Ulcer—		Chest, gunshot.....	13
Arm	3	Foot, gunshot.....	5
Foot	8	Head, gunshot.....	8
Jaw	6	Jaw, gunshot.....	2

Knee, gunshot.....	1	Chest, stab.....	8
Leg, gunshot.....	18	Knee, stab.....	2
Neck, gunshot.....	1	Leg, stab.....	4
Shoulder, gunshot.....	6	Neck, stab.....	15
Abdomen, stab.....	6		
Arm, stab.....	9		
Back, stab.....	9	Total	7,310

GOUVERNEUR HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Surgical and Gynecological.

Abortion—		Femoral.	1
Complete	20	Inguinal	26
Incomplete	2	Inguinal, suppurated.....	1
Threatened	1	Adenoma of neck.....	1
Abscess—		Amputation, traumatic—	
Alveolar.	4	Arm.	2
Axillary	2	Fingers	4
Cervical	1	Foot	1
Ischio-rectal.	13	Legs	1
Mediastinal	1	Toes	3
Palmar	1	Anus, imperforate.....	1
Pelvic	3	Appendicitis	36
Perineal	1	Asphyxia, foreign body in	
Tubo-ovarian	1	larynx	1
Vulvo-vaginal	2	Balanitis, gonorrheal.....	1
Of heel.....	1	Burns—	
Of brain.....	1	General	4
Of jaw.....	1	Infected and granulated..	1
Of neck.....	3	Of arms.....	5
Of side.....	1	Of back.....	1
Of thigh.....	2	Of body.....	5
Adenitis—		Of chest.....	3
Axillary	4	Of face and hands.....	4
Cervical	9	Of feet.....	3

Of hands.....	1	Buttocks	1
Of legs.....	6	Chest	10
Of thighs.....	2	Elbow	1
Bursitis—		Eye	4
Suppurative, prepatellar...	8	Foot	5
Elbow	1	Face	4
Hip	1	Hand	1
Carbuncle—		Head	7
Neck	2	Hip	10
Back	1	Jaw	1
Carcinoma—		Knee	8
Face	1	Leg	12
Maxilla	1	Ribs	1
Kidney	1	Scalp	4
Liver	3	Shoulder	2
Uterus	2	Side	4
Caries—		Thigh	3
Maxilla	1	Cystitis—	
Metacarpus	1	Acute	2
Cellulitis—		Chronic	5
Pelvis	6	Cyst—	
Arm	3	Ovarian	1
Axilla	1	Broad ligament.....	1
Chest	2	Liver	1
Foot	7	Buttock	1
Hand	9	Dislocation—	
Leg	12	Of ankle joint.....	2
Thigh	2	Of elbow.....	4
Chancroids	4	Of hip.....	2
Cholelithiasis	8	Of knee.....	1
Cleft palate.....	1	Of shoulder.....	2
Concussion—		Of wrist.....	1
Brain	15	Dysmenorrhea	1
Spine	1	Eczema	8
Conjunctivitis	1	Fmpyema	3
Contusions—		Endometritis—	
General	4	Acute	5
Abdomen	7	Chronic	16
Ankle	12	Epididymitis, tubercular....	11
Back	15	Epididymitis	1
Body	2	Epistaxis	9

Epithelioma—		Skull	8
Face	2	Tibia	6
Groin	1	Tibia and fibula.....	9
Lip	2	Gangrene—	
Epulis maxillæ.....	1	Scrotum.	1
Erysipelas—		Toe	3
Facial	12	Gingivitis	1
Foot	1	Gonorrhea	10
Leg	1	Hematoma—	
Fibroma—		Scalp	2
Of breast.....	2	Scrotum	1
Of cervix.....	2	Hematosalpinx	1
Of uterus.....	1	Hematuria.	1
Of hip.....	1	Hallux valgus.....	2
Fistula in ano.....	5	Hammer toe.....	1
Fistula, urethral.....	2	Hemorrhage—	
Foreign body in abdomen..	2	Urethral.	1
Fracture, simple—		Alveolar	1
Clavicle	12	Hemorrhoids	22
Colles'	9	Hernia—	
Femur, neck.....	4	Femoral	2
Femur, shaft.....	33	Femoral, strangulated....	1
Fibula	7	Inguinal	31
Humerus	6	Inguinal, strangulated....	4
Iliac crest.....	1	Umbilical	3
Maleolus	2	Umbilical, strangulated...	2
Maxilla inf.....	11	Ventral	2
Metacarpus	1	Hydrocele	2
Metatarsus	4	Hypospadias	1
Nasal bones.....	3	Hypertrophy, prostate.....	1
Olecranon process.....	2	Lacerated cervix.....	2
Patella	6	and perineum.....	3
Pott's	31	Lacerated perineum.....	1
Radius.	2	Lipoma	2
Radius and ulna.....	4	Lymphangitis.	2
Ribs	19	Mastoid disease.....	3
Skull, external plate.....	3	Menorrhagia.	3
Skull, depressed.....	1	Miscarriage	1
Skull, base of.....	5	Necrosis—	
Fracture, compound—		Of jaw.....	1
Humerus	4	Of pancreas.....	1

Of sternum.....	1	Puerperal.	3
Of tibia.....	1	Shock	5
Nephrolithiasis	2	Sinus, abdominal.....	1
Orchitis	8	Spondylitis, tubercular.....	1
Osteo-mylitis—		Sprains—	
Femur	1	Of ankle.....	30
Tibia	5	Of back.....	1
Chronic, unclassified.....	2	Of foot.....	1
Otitis media.....	1	Of knee.....	3
Osteitis, tubercular, unclassified	2	Of shoulder.....	1
fied		Of wrist.....	2
Papilloma—		Stenosis—	
Cervix	1	Laryngeal	2
Lip	1	Diphtheritic	2
Paraphimosis	2	Stricture—	
Peritonitis, acute.....	4	Of urethra.....	16
Periostitis, jaw.....	2	Of rectum.....	1
Pes planus.....	1	Synovitis knee.....	10
Phimosis	6	Syphilis	14
Phlebitis	2	Testicle, undescended.....	1
Pregnancy—		Ulcer—	
Craniotomy	1	Rectal	2
Extra uterine.....	2	Leg.	3
Prolapse—		Syphilitic	3
Of rectum.....	2	Traumatic, leg.....	2
Of uterus.....	2	Varicose, leg.....	7
Retroversion of uterus.....	2	Urethra, gonorrheal.....	1
Rupture—		Urine, retention of.....	1
Of liver.....	1	Urethritis	1
Of lateral ligaments of		Vaginitis—	
knee joint.....	1	Acute, gonorrheal.....	2
Of tympanum.....	1	Syphilitic	1
Of urethra.....	1	Varicocele	1
Salpingitis, unclassified—		Varicose veins.....	4
Catarrhal	5	Wound—	
Suppurative.	10	Scalp:	
Sapremia	1	Unclassified	39
Sarcoma, multiple.....	1	Infected	2
Scar, adherent.....	1	Infected:	
Sepsis—		Arm.	2
General	2	Foot	4

Hand	2	Scrotum	2
Leg	5	Side.	1
Prepuce	1	Wrist	1
Incised:		Toe	1
Arm	1	Gunshot:	
Face	2	Abdomen	3
Hand	1	Arm.	1
Knee	1	Back	1
Thigh	1	Buttocks.	1
Throat	1	Cheek	1
Quadriceps, tendon....	1	Chest	1
Lacerated:		Hand	2
Abdomen	2	Head	4
Arm.	2	Leg	2
Ankle.	1	Mouth.	1
Brow.	4	Thigh	2
Chest	1	Stab or punctured:	
Elbow	1	Arm	1
Eye	2	Back	1
Face	1	Chest.	2
Finger	1	Foot	1
Foot	2	Leg	1
Groin	1	Neck.	1
Hand	4	Stomach	1
Hip	1	Thigh	1
Leg	4		
Nose	1	Total	1,142

HARLEM HOSPITAL.

DISEASES OF PATIENTS DISCHARGED.

1902.

Surgical and Gynecological.

Abscess—		Hip	1
Abdominal wall.....	1	Inguinal	1
Breast	1	Ischio-rectal	6
Cerebral	1	Knee.	1

Neck	1	Carcinoma—	
Peritonsillar.	2	Breast.	5
Vulvo-vaginal	1	Cervix	1
Unclassified	4	Liver	2
Adenitis—		Mouth.	1
Axillary	3	Neck	1
Cervical	4	Rectum	2
Inguinal	2	Stomach	1
Tubercular, unclassified...	4	Uterus	3
Adenoids	1	Cellulitis—	
Amputation, traumatic—		Arm.	2
Fingers	6	Foot	5
Forearm.	1	Great toe.....	1
Foot	1	Hand	6
Great toe.....	2	Knee	3
Leg	5	Leg	5
Thumb	2	Pelvic	3
Amenorrhea	1	Chancroids	1
Ankylosis—		Cholelithiasis	2
Elbow joint.....	3	Cicatricial contraction of	
Temporo-maxillary joint..	1	hand.	2
Appendicitis	45	Condylomata	3
Arthritis—		Concussion, cerebral.....	19
Tubercular.	1	Contusion—	
Septic	2	Abdomen	5
Burns—		Ankle	2
Abdomen	1	Arm	1
Arm.	2	Arm, back and chest.....	2
Arm and buttock.....	1	Back	3
Arm and chest.....	1	Back and hip.....	1
Body	11	Body	5
Body and face.....	1	Cheek	1
Body, face and hands....	4	Chest	1
Buttock and leg.....	2	Ear	2
Foot	2	Eye.	2
Face and hands.....	4	Face.	1
Hand	1	Foot	1
Hip and knee.....	1	Hand	2
Leg	2	Head	3
Carbuncle of neck.....	2	Head and body.....	4
		Hip	8

Leg	2	Clavicle	9
Neck	1	Elbow	2
Knee	4	Femur	37
Shoulder	2	Fibula	9
Scalp	3	Inferior maxilla.....	2
Scrotum	1	Metacarpus	2
Thigh	2	Metatarsus	2
Toe	1	Nasal bones.....	3
Conjunctivitis, purulent.....	2	Patella	3
Cystitis—		Phalanges	1
Acute	9	Ribs	17
Chronic	2	Radius	5
Cyst, ovarian.....	2	Radius and ulna.....	5
Dactylitis	1	Sacrum	1
Dislocation—		Skull, base.....	22
Clavicle	2	Skull, base and vault.....	3
Elbow	4	Skull, vault.....	1
Hip	2	Skull, vault depressed....	11
Thumb	3	Spine	1
Shoulder	6	Tibia	19
Ectopic gestation.....	1	Tibia and fibula.....	35
Eczema of leg.....	2	Ulna (greenstick).....	1
Empyema	8	About wrist.....	10
Endometritis	19	Compound:	
Endothelioma, retro-perito-		Elbow.	3
neal glands	1	Femur.	1
Epididymitis	1	Humerus	1
Epithelioma of lip.....	1	Inferior maxilla.....	2
Epistaxis	9	Metacarpus	1
Erythema, nodosum.....	1	Metatarsus	2
Erysipelas—		Nasal bones.....	1
Of face.....	40	Radius and ulna.....	3
Of leg.....	2	Skull, vault.....	1
Fistula in ano.....	2	Tibia	3
Fistula in perineal.....	2	Tibia and fibula.....	8
Fibroid tumor of uterus....	2	Toe	1
Fibro-chondroma of breast.	1	Frost bite, hands and feet..	1
Floating kidney.....	1	Gangrene—	
Fracture—		Of fingers.....	1
About ankle.....	39	Of foot.....	1
Humerus	12	Genu valgum.....	1

Gonorrhea	6	Pyelitis	1
Hematoma—		Ranula	1
Of knee.....	1	Retained placenta.....	3
Of scalp.....	1	Retention of urine.....	2
Hallux valgus.....	1	Retroversion of uterus.....	3
Hare lip.....	1	Rupture—	
Hemorrhage—		Eyeball	1
Cerebral	6	Intra-spinous, ligaments..	1
Uterine.	2	Internal ligaments of	
Hemorrhoids	1	ankle joints.....	1
Hernia—		Ligamentum patella.....	1
Femoral	4	Salpingitis.	14
Inguinal	11	Septicemia, puerperal.....	5
Inguinal, strangulated....	1	Spondylitis	2
Ventral	2	Sprain—	
Hydrocele	1	Of ankle.....	12
Impetigo	1	Of back.....	2
Lymphangitis of leg.....	1	Of knee.....	1
Mastitis	1	Of wrist.....	2
Mastoiditis	1	Stricture of urethra.....	1
Menorrhagia	1	Synovitis of knee.....	6
Metrorrhagia	2	Syphilis	6
Necrosis—		Tetanus	2
Frontal bone.....	1	Tubercular hip.....	2
Inferior maxilla.....	2	Tubercular knee.....	1
Sacrum	2	Tubercular wrist.....	2
Tarsus	2	Tuberculosis—	
Tibia	1	Of larynx.....	1
Ophthalmia, unclassified....	2	Of bladder.....	2
Orchitis, syphilitic.....	2	Ulcer—	
Osteo-myelitis	1	Gastric	7
Otitis media.....	1	Of leg.....	20
Paraphimosis	3	Vaginitis	1
Pemphigus	1	Varicose veins.....	3
Peritonitis.	1	Varicocele	3
Peritonitis, tubercular.....	2	Wound—	
Pes planus.....	1	Infected:	
Phimosis	1	Foot	4
Polypus of uterus.....	1	Hand	1
Prolapsus of rectum.....	3	Knee	1
Prolapsus of uterus.....	1	Thumb	3

Gunshot:		Incised:	
Arm	1	Arm.	1
Abdomen	1	Hand	1
Foot	2	Knee	3
Head	1	Leg	1
Leg	1	Neck	1
Neck	1	Side	2
Lacerated:		Stab:	
Fingers	1	Abdomen	3
Forearm.	5	Hand	2
Foot	2	Wrist	2
Head.	2	Arm	2
Leg	2	Chest	3
Nose	1	Head	6
Scalp.	18	Unclassified	3
Toe	2	Total	938

FORDHAM HOSPITAL.
DISEASES OF PATIENTS DISCHARGED.

1902.

Surgical and Gynecological.

Appendicitis	7	Knee	1
Amputation—		Abdominal tumor (fibroid	1
Traumatic arm.....	1	uterus)	1
Toes (2).....	1	Adenoma, breast.....	
Thumb	1	Adenitis, inguinal.....	2
Thumb and laceration of		Abortion—	1
hand (crushed).....	1	Induced	3
Traumatic, thumb and fin-		Incomplete	
gers	1	Bubo	1
Abscess—		Burns—	1
Leg and ankle.....	1	Legs	1
Neck	2	Eyes	
Foot, tubercular.....	2	Body	1
Ischio-rectal	3	Hands and face.....	1
Prostatic	1	Arms and body.....	1
Vulvo-vaginal	3	Bursitis, right knee.....	1

Cellulitis of arm.....	1	Fractures—	
Carcinoma—		Simple:	
Penis	1	Femur	14
Uterus	2	Femur and Colles'.....	1
Chancroids	1	Humerus	4
Contusion—		Patella	6
Of shoulder.....	5	Ribs	13
Of knee.....	1	Tibia	9
Of hip.....	9	Tibia and fibula.....	5
Of wrist and face.....	2	Fibula	1
Of head and face.....	2	Fibula and ribs.....	2
Of spine	1	Sternum	1
Of back.....	16	Ankle	7
Of hand.....	3	Clavicle	2
Of leg.....	10	Malar bone.....	2
Of ankle.....	2	Nasal bone.....	4
Of shoulder.....	2	Nasal bone and ribs....	1
Of ribs.....	4	Pelvis	1
Of face.....	3	Pelvis and ruptured	
Of thigh.....	1	spleen	1
Of head and back.....	5	Skull, base.....	1
Of leg and ribs.....	3	Skull, base and ribs....	2
Of eye.....	1	Colles'	8
Cyst over coccyx.....	1	Inferior maxilla.....	4
Cyst of neck.....	1	Spine	1
Cancer—		Radius and ulna.....	3
Of stomach.....	1	Compound:	
Of breast.....	1	Humerus	1
Concussion—		Tibia	2
Brain and scalp wound... 11		Tibia and fibula.....	3
Dislocated shoulder.....	4	Skull, base.....	2
Elbow	2	Skull, vault.....	2
Jaw and scalp wounds....	1	Gangrene of fingers.....	3
Clavicle	2	Gall stone.....	1
Endometritis	11	Gonorrhea	16
Epididymitis	1	Gonorrhea and epidyde-	
Epithelioma, lip.....	1	mitis	1
Floating kidney.....	2	Hemorrhoids	7
Fistula in ano.....	2	Hallux valgus.....	1
Frost bite—		Hemorrhage—	
Of hands.....	2	Cerebral	2
Of toes.....	1	Post-partum	2

Hernia—		Incised:	
Inguinal	2	Ear	1
Inguinal, strangulated....	2	Nose	2
Ventral	1	Neck	4
Hydrocele	2	Abdomen	2
Ingrown toe nails.....	3	Leg	5
Intestinal obstruction.....	1	Back	2
Lacerated cervix.....	4	Wrist	2
Lacerated perineum.....	1	Fingers	6
Lacerated perineum and en-		Infected:	
dometritis	1	Face	1
Mastitis	1	Hand	2
Mastoiditis	1	Leg	1
Necrosis of jaw.....	1	Lacerated:	
Orchitis	5	Neck	1
Orchitis, tubercular.....	1	Leg	1
Osteo-myclitis, unclassified.	1	Wrist	1
Ovaritis	2	Foot	1
Ovarian cyst.....	2	Knee	0
Phimosis	4	Hand	4
Rupture—		Chin	1
Internal, lateral ligaments		Fingers	3
of knee.....	1	Arm	1
External, lateral ligaments		Eye	3
of ankle.....	2	Toes	1
Kidney	2	Ear	1
Sprained ankle.....	4	Ankle	1
Sprained knee.....	1	Gunshot:	
Shock	5	Head	2
Syphilis, tertiary.....	1	Abdomen	1
Tubercular glands of neck..	1	Leg	1
Tubercular hip.....	1	Back	1
Ulcer of leg.....	2	Knee	1
Ulcer of stomach.....	1	Arm	1
Vaginismus	3	Arm and fractured femur	1
Varicose veins.....	7	Stab:	
Varicocele	28	Chest	2
Varicose ulcer.....	5	Knee	1
Wounds—		Back	2
Scalp (unclassified).....	28	Total	49

TABLE No. IV.—SURGICAL STATISTICS.

BELLEVUE HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Surgical and Gynecological.

Abscess—		Gangrene, leg	1
Cerebral	2	Hernia—	
Hip	1	Strangulated, unclassified.	3
Liver	4	Femoral	1
Pelvic	1	Inguinal	1
Amputation, traumatic.....	1	Ventral	2
Angina Ludovici.....	1	Injuries, coroners' cases....	55
Anthrax	1	Intestinal obstruction	4
Appendicitis	5	Osteo-myelitis, acute.....	1
Burns	10	Otitis media, acute.....	1
Carbuncle	1	Parotiditis, suppurative.....	1
Carcinoma—		Peritonitis, general, septic..	27
Bladder	2	Pleurisy with effusion.....	1
Breast	4	Pyemia	4
Intestine	4	Pyonephritis	1
Lip	1	Rupture of uterus.....	1
Esophagus	1	Sarcoma—	
Ovary	1	Kidney	1
Rectum	2	Jaw	1
Throat	5	Orbit	1
Uterus	6	Ovary	1
Cellulitis	8	Syphilis, Septicemia—	
Cerebral tumor	3	Post partum.....	9
Ectopic gestation	3	Post abortion.....	5
Erysipelas	27	Abscess of breast.....	1
Epithelioma of penis.....	1	Mastoid	1
Fracture of femur—		Shock	9
Compound	1	Strangulation	1
Ribs	2	Syphilis—	
Skull	34	Unclassified	1
Spine	1	Cerebral	3

Congenital	2	Gun shot.....	4
Tuberculosis, prostate gland.	1	Stab	2
Wounds—			
Cut throat	1	Total	281

GOUVERNEUR HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Surgical and Gynecological.

Abortion, profuse hemorrhage	2	Hemorrhage—	
Abscess—		Post partum	1
Retropharyngeal	1	Placenta previa.....	1
Of brain (otitis media)...	1	Hernia—	
Liver	1	Strangulated femoral....	1
Lung	1	Inguinal, strangulated....	1
Amputation, traumatic, leg..	3	Intussusception	2
Appendicitis	4	Intestinal obstruction.....	1
Burns—		Imperforate anus.....	1
General	17	Papilloma of ovary (malignant)	1
Arms and legs.....	1	Peritonitis—	
Body	3	Acute	3
Face and arms.....	2	Purulent	1
Thigh	2	Rupture of spleen.....	1
Carcinoma—		Shock	3
Abdomen	1	Septicemia (due to gangrene back and thigh).....	3
Larynx	1	Tetanus	2
Stomach	1	Tumor, abdominal	1
Uterus	1	Ulcer, duodenal perforation.	1
Carcinosis, general.....	1	Wound—	
Eclampsia, puerperal.....	2	Abdominal, stab.....	1
Fracture—		Chest, gunshot.....	1
Pelvis	1	Kidney, stab.....	1
Ribs	1	Stomach, stab.....	1
Base of skull.....	23	Total	102
Vault of skull.....	3		
Sternum	1		

HARLEM HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Surgical and Gynecological.

Abscess—		Parotidis, suppurative.....	1
Cerebellar	1	Peritonitis	11
Of lungs	1	Tubercular	1
Appendicitis—		Ruptured bladder.....	1
Gangrenous	1	Intestine and septic peri-	
Suppurative	1	tonitis	1
Burns of body, 2d degree...	5	Intestine and internal hem-	
Carbuncle	1	orrhage	1
Carcinoma of liver.....	1	Liver	1
Stomach	2	Spleen (traumatic).....	2
Cellulitis of leg	1	Sarcoma of neck.....	1
Fracture—		Septicemia	7
Base of skull.....	24	Shock	3
Base and vault, skull.....	3	Tetanus	1
Vault of skull, compound.	6	Ulcer of Stomach.....	1
Hemorrhage—		Wound—	
Cerebral	7	Of abdomen, gunshot.....	1
Post partum.....	2	Chest, gunshot.....	2
Hernia—		Head, gunshot.....	1
Inguinal, strangulated...	2	Wounds—	
Umbilical, strangulated...	1	Abdomen, stab.....	1
Internal injuries, unclassified	5	Head and shoulders, gun-	
Intestinal obstruction, un-		shot	1
classified	5		
Intussusception	3		
Meningitis	2	Total	112

FORDHAM HOSPITAL.

DISEASES CAUSING DEATH.

1902.

Surgical and Gynecological.

Abscess—		Base	1
Cerebral	1	Ribs and clavicle.....	1
Psoas	1	Spine	1
Amputation—		Gunshot wound, skull.....	1
Arm, traumatic.....	1	Hemorrhage, uterine.....	1
Both legs, traumatic.....	2	Intestinal obstruction.....	3
Both legs and fractured		Peritonitis, general.....	4
skull, traumatic.....	1	Puerperal sepsis.....	2
Leg, gangrenous.....	1	Pregnancy, tubal, ruptured..	1
Appendicitis	5	Shock—	
Burns—		Hemorrhage and laceration	
Arms and legs, 2d degree.	1	of lung.....	1
Arms and body, 1st and		From lacerated wound, abdomen	
2d degree.....	1	.....	2
Body and face, 1st degree.	3	Septicemia and extravasation	
Carcinoma of breast.....	1	of urine.....	1
Empyema	2	Tetanus following infected	
Fractured—		wound of knee.....	1
Pelvis and ribs.....	1		
Skull	5		
Compound	3	Total	49

TABLE No. V.—SURGICAL STATISTICS.

BELLEVUE HOSPITAL.

Surgical and Gynecological Operations.

1902.

	CURED.	IMPROVED.	DIED.	TOTAL.
Amputations—				
Arm	5	..	..	5
Breast	16	2	1	19
Cervix uteri	26	..	..	26
Fingers	15	5	..	20
Foot	2	..	..	2
Forearm	1	..	..	1
Leg	7	1	2	10
Penis	3	..	..	3
Thigh	6	..	1	7
Toes	9	..	1	10
Arthrotomy—				
Knee	3	7	1	11
Cautery—				
Hemorrhoids	4	..	..	4
Ovaries	3	..	..	3
Rectum	2	..	..	2
Urethral caruncle	1	..	..	1
Uterine carcinoma .....	..	4	..	4
Coeliotomy—				
Abscess of liver	4	..	1	5
Adnexapexy	2	..	..	2

	CURED.	IMPROVED.	DIED.	TOTAL.
Appendicitis	39	2	5	46
Bullet wound .....	..	..	1	1
Bullet wound of intestine .....	..	..	1	1
Caesarian section	1	..	..	1
Cholecystectomy	3	1	1	5
Cholecystenterostomy	1	..	..	1
Cholecystostomy	1	..	..	1
Colostomy, inguinal .....	..	..	1	1
Colpotomy	37	1	1	39
Cyst :				
Dermoid	1	..	..	1
Ovarian	1	..	2	3
Ectopic gestation	4	..	1	5
Exploratory	11	2	4	17
Fecal fistula .....	..	..	1	1
Fibroid tumor of uterus .....	..	..	2	2
Gastro-enterostomy	2	..	1	3
Gastrostomy	1	..	1	2
Hydrosalpinx	1	..	..	1
Hysterectomy :				
Abdominal	25	1	8	34
Vaginal	6	..	2	8
Intestinal :				
Anastomosis	1	..	..	1
Obstruction .....	..	..	1	1
Perforation .....	..	..	1	1
Oophorectomy	12	..	..	12
Ovariectomy	2	..	..	2
Pelvic cellulitis	1	..	..	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Penetrating wound of abdomen.....	..	..	2	2
Pyonephrosis.....	1	1	..	2
Pyo-salpinx	2	..	..	2
Resection of :				
Ovaries.....	1	..	..	1
Transverse colon.....	1	..	..	1
Rupture of kidney .....	..	..	1	1
Salpingectomy.....	7	..	..	7
Salpingo-oophorectomy	62	..	2	64
Uterine fixation—				
Alexander's.....	22	..	..	22
Dudley's.....	4	..	..	4
Kelly's.....	5	..	..	5
Ventral.....	6	..	..	6
Wylie's.....	14	..	..	14
Curettage—				
Carcinoma cervix uteri.....	..	1	1	1
Fistula in ano.....	2	3	1	6
Uterus :				
Non-septic.....	159	..	5	164
Septic.....	53	5	..	58
Unclassified	86	..	4	90
Excisions—				
Bursae.....	2	..	..	2
Carbuncle	6	3	2	11
Condylomata.....	4	2	..	6
Fistula in ano.....	33	15	..	48

	CURED.	IMPROVED.	DIED.	TOTAL.
Foreign body :				
Back	2	1	..	3
Thigh	1	..	..	1
Glands :				
Axillary	3	3	..	6
Cervical.....	19	6	..	25
Inguinal	27	27	..	54
Parotid	1	..	..	1
Sub-maxillary.....	1	..	..	1
Thyroid	1	..	..	1
Unclassified	2	..	..	2
Hemorrhoids.....	67	21	..	88
Joint :				
Elbow.....	1	1	..	2
Knee	5	3	1	9
Wrist.....	2	..	..	2
Larynx .....	..	..	1	1
Rib.....	8	2	3	13
Rectum	1	1	..	2
Tongue.....	..	..	1	1
Tumors—				
Carcinoma :				
Of cervix .....	..	1	..	1
Inguinal gland.....	..	1	..	1
Cyst, sebaceous, of buttock.....	1	..	..	1
Epithelioma :				
Jaw	1	..	..	1
Lip	5	1	1	7
Ear	1	..	..	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Leg.....	1	..	..	1
Neck.....	2	1	..	3
Orbit.....	..	1	..	1
Scalp.....	1	..	..	1
Lipoma :				
Shoulder.....	2	..	..	2
Axilla.....	2	..	..	2
Abdominal wall.....	1	..	..	1
Eyelid.....	1	..	..	1
Papilloma—Penis.....	1	..	..	1
Polypus :				
Cervix.....	2	..	..	2
Rectum.....	3	..	..	3
Varicose veins.....	10	3	..	13
Fractures—				
Compound :				
Radius and ulna.....	3	..	..	3
Radius and leg.....	13	12	2	27
Femur.....	3	4	1	8
Humerus.....	..	6	1	7
About elbow.....	..	2	..	2
Forearm.....	2	..	..	2
Inferior maxilla.....	..	3	..	3
Os calcis.....	1	..	..	1
Ribs.....	..	1	..	1
Suture of patella.....	5	1	..	6
Wiring of :				
Femur.....	1	..	..	1
Humerus.....	2	..	..	2

	CURED.	IMPROVED.	DIED.	TOTAL.
Olecranon	2	..	..	2
Patella	9	..	..	9
Genito-urinary (male and female)—				
Bubo.....	11	3	..	14
Circumcision	37	7	..	44
Colporrhaphy	2	..	..	2
Cystoscopy.....	1	..	*1	2
Cystotomy :				
Stone.....	1	..	..	1
Tumor .....	..	2	..	2
Dilatation of cervix.....	23	..	..	23
Hydrocele	26	4	..	30
Hypospadias .....	..	3	..	3
Meatotomy.....	5	..	..	5
Nephro-lithotomy	2	..	..	2
Nephrorrhaphy.	11	..	..	11
Orchidectomy.....	10	2	..	12
Orchoplasty	3	..	..	3
Perineal abscess	3	1	..	4
Perinorrhaphy.....	94	..	..	94
Peri-urethral abscess.....	6	2	..	8
Prostatectomy.....	7	2	3	12
Trachelorrhaphy	10	..	..	10
Trachelotomy	1	..	..	1
Urethral fistula.....	..	2	..	2
Urethrotomy :				
External	20	6	..	26
Internal	4	1	..	5

* Death due to pulmonary tuberculosis.

	CURED.	IMPROVED.	DIED.	TOTAL.
Combined.....	16	2	..	18
Unclassified.....	15	2	..	17
Varicocele.....	60	4	..	64
Vulvo-vaginal abscess.....	2	..	..	2
Hernia—				
Femoral.....	9	..	..	9
Femoral, strangulated.....	1	..	2	3
Inguinal.....	132	2	1	135
Inguinal, strangulated.....	6	..	5	11
Umbilical.....	5	..	..	5
Umbilical, strangulated.....	1	..	1	2
Ventral.....	19	..	..	19
Ventral, strangulated.....	1	..	..	1
Incisions—				
Abscess :				
Abdominal wall.....	..	..	..	1
Alveolar.....	4	4	..	8
Axillary.....	7	1	..	8
Buttock.....	1	..	..	1
Ischio-rectal.....	25	39	..	64
Jaw.....	1	1	..	2
Leg.....	5	4	..	9
Mammary.....	10	2	1	13
Chest wall.....	..	1	..	1
Iliac.....	2	..	..	2
Neck.....	7	1	1	9
Prepatella.....	3	7	..	10
Prostatic.....	3	1	..	4
Psoas.....	4	1	..	5

	CURED.	IMPROVED.	DIED.	TOTAL.
Retropharyngeal .....	..	1	..	1
Scrotal	3	..	..	3
Sub-maxillary	2	1	..	3
Unclassified	7	4	..	11
Cellulitis :				
Arm	3	13	1	17
Chest wall .....	..	1	..	1
Elbow	2	..	..	2
Finger	2	1	..	3
Foot	11	14	..	25
Ear .....	..	1	..	1
Hand	18	16	..	34
Leg	35	16	..	51
Neck	4	8	2	14
Penis	1	..	..	1
Scalp	2	1	..	3
Thigh	2	..	1	3
Wrist	1	..	..	1
Empyema .....	..	2	..	2
Empyema—Antrum of Highmore	1	..	..	1
Extravasation of urine	8	2	3	13
Frontal sinusitis	1	..	..	1
Hematoma—Buttocks .....	..	..	1	1
Mastoiditis	9	1	1	11
Mastoiditis and sinus thrombosis	1	..	..	1
Necrosis :				
Cartilage of knee .....	..	1	..	1
Metatarsus	2	..	..	2

	CURED.	IMPROVED.	DIED.	TOTAL.
Osteomyelitis :				
Astragalus	1	..	..	1
Coccyx.....	..	1	..	1
Femur.....	2	4	..	6
Sacrum.....	1	..	..	1
Superior maxilla.....	..	2	..	2
Tibia.....	2	..	..	2
Ulna.....	1	..	..	1
Osteotomy :				
Genu valgus.....	8	..	1	9
Genu varum.....	2	..	..	2
Externum.....	3	..	..	3
Hallux valgus.....	9	2	..	11
Osteitis.....	11	4	1	16
Periostitis.....	3	1	..	4
Tracheotomy.....	1	..	1	2
Tuberculosis :				
Finger .....	..	1	..	1
Ankle	1	..	..	1
Elbow.....	1	..	..	1
Femur.....	..	2	..	2
Hip.....	1	..	..	1
Tenotomy.....	2	..	..	2
Plastic—				
Arm.....	1	..	..	1
Leg.....	2	..	..	2
Hare lip.....	2	1	..	3
Cleft palate.....	1	1	..	2
Skin grafting.....	12	1	..	13

	CURED.	IMPROVED.	DIED.	TOTAL.
Miscellaneous—				
Anastomosis, facial to spinal accessory } nerve.....	..	1	..	1
Bottini operation.....	..	1	..	1
Congenital:				
Atresia of vagina.....	1	..	..	1
Dislocation of hip (Lorenz).....	..	2	..	2
Fissure of anus (dilatation).....	1	..	..	1
Lacerated wound:				
Scalp.....	6	2	..	8
Leg.....	1	1	..	2
Thigh.....	..	1	..	1
Ligation vas deferens.....	1	..	..	1
Morcellation of fibroid uterus.....	1	..	..	1
Rapid emptying of uterus.....	1	..	..	1
Stab wound, heart, suture.....	..	..	1	1
Talipes equinus.....	1	..	..	1
Tenorrhaphy.....	2	2	..	4
Tonsillotomy.....	1	..	..	1
Trephining:				
Cerebral abscess.....	..	..	1	1
Cerebral tumor.....	1	..	1	2
Fracture.....	8	2	2	12
Gunshot wound.....	1	..	1	2
Varicose veins:				
Multiple ligation.....	14	1	..	15
Ligation of saphenous.....	8	1	..	9
	1,792	382	102	2,276

Table No. V. (*Continued*)—Surgical Statistics.

GOUVERNEUR HOSPITAL.

Surgical and Gynecological Operations.

1902.

	CURED.	IMPROVED.	DIED.	TOTAL.
Amputations—				
Arm	3	..	..	3
Finger	1	..	..	1
Foot	1	..	..	1
Leg.	1	..	..	1
Thigh	3	..	..	3
Toes	6	..	..	6
Cœliotomy—				
Abscess of liver.....	1	..	..	1
Appendicitis.....	35	..	4	39
Cholecystotomy.....	4	..	..	4
Dermoid cyst of broad ligament.....	1	..	..	1
Dermoid cyst of ovary.....	1	..	..	1
Enterorrhaphy	2	1	..	3
Exploratory.....	..	..	1	1
Extra-uterine pregnancy.....	3	..	..	3
Fibro-myoma of uterus.....	1	..	..	1
Foreign body in abdomen.....	1	..	..	1
Gastrorrhaphy	1	..	..	1
Hysterectomy.....	3	..	..	3
Intussusception .....	..	..	3	3
Pap'lloma of ovary.....	..	..	1	1
Perforating duodenal ulcer .....	..	..	1	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Peritonitis :				
Tubercular .....	..	1	..	1
Suppurative.....	2	..	4	6
Salpingo-oophorectomy.....	16	..	..	16
Uterine fixation, ventral.....	2	..	..	2
Curettage—Uterus.....	38	..	..	38
Excisions—				
Carbuncle	1	..	1	2
Eyeball.....	1	..	..	1
Fistula in ano.....	6	..	..	6
Foreign body in abdominal wall.....	1	..	..	1
Gasserian ganglion	1	..	..	1
Glands :				
Axillary	4	..	..	4
Cervical	5	..	..	5
Inguinal.....	25	..	..	25
Hemorrhoids.....	20	2	..	22
Ribs.....	3	..	1	4
Superior cervical sympathetic ganglion....	1	..	..	1
Superior maxilla.....	1	..	..	1
Tumors :				
Adenoma of neck.....	1	..	..	1
Cyst, dermoid of buttock.....	2	..	..	2
Epithelioma of :				
Face	1	..	..	1
Lip	1	..	..	1
Epulis of inferior maxilla.....	1	..	..	1
Fibroma of breast.....	1	..	..	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Lipoma of back.....	1	..	..	1
Papilloma of lip.....	1	..	..	1
Fractures—Wiring patella.....	3	..	..	3
Genito-urinary—				
Circumcision.....	6	1	..	7
Epididymectomy.....	1	..	..	1
Gangrene of scrotum.....	1	..	..	1
Hydrocele.....	1	..	..	1
Hypo-padias.....	1	..	..	1
Nephrotomy.....	1	..	1	2
Orchidectomy.....	1	..	..	1
Paraphimosis.....	3	..	..	3
Perineal abscess.....	1	..	..	1
Perinorrhaphy.....	4	..	..	4
Trachelorrhaphy.....	4	..	..	4
Testicle, undescended.....	1	..	..	1
Urethral fistula.....	1	..	..	1
Urethrotomy, external.....	12	..	..	12
Varicocele.....	2	..	..	2
Vulvo-vaginal abscess.....	3	..	..	3
Hernia—				
Femoral.....	3	..	..	3
Femoral, strangulated.....	3	..	1	4
Inguinal.....	35	..	..	35
Inguinal, incarcerated.....	1	..	..	1
Inguinal, strangulated.....	3	..	2	5
Ventral.....	2	..	..	2

	CURED.	IMPROVED.	DIED.	TOTAL.
Incisions—				
Abscess :				
Alveolar.	5	..	..	5
Back.	3	..	..	3
Foot.	1	..	..	1
Hand..	1	..	..	1
Ischio-rectal.	12	..	..	12
Neck..	2	..	..	2
Pelvic.	7	..	1	8
Thigh.	2	..	..	2
Bursitis, prepatellar.	4	..	..	4
Cellulitis :				
Hand..	5	..	..	5
Leg.	7	..	..	7
Scrotum.	1	..	..	1
Thigh.	2	..	..	2
Necrosis :				
Inferior maxilla.	3	..	..	3
Humerus.	1	..	..	1
Metatarsus.	1	..	..	1
Sternum.	1	..	..	1
Tibia.	1	..	..	1
Osteotomy.	5	..	..	5
Tonsillotomy.	1	..	..	1
Tracheotomy.	1	..	..	1
Miscellaneous—				
Dilatation, stricture of rectum.	1	..	..	1
Imperforate anus. ....	..	..	1	1
Tendon, suture.	1	..	..	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Trephining.....	9	..	4	13
Ununited fracture.....	1	..	..	1
Varicose ulcer.....	2	..	..	2
Total.....	377	4	27	408

Table No. V. (*Continued*)—Surgical Statistics.

HARLEM HOSPITAL.

Surgical and Gynecological Operations.

1902.

	CURED.	IMPROVED.	DIED.	TOTAL.
Amputations—				
Fingers.....	10	..	..	10
Foot.....	1	..	..	1
Great toe	2	..	..	2
Leg.....	7	..	..	7
Coeliotomy—				
Appendicitis.....	32	..	6	38
Ectopic gestation.....	2	..	..	2
Hysterectomy.....	5	..	4	9
Intussusception.....	1	..	1	2
Intestinal obstruction.....	..	..	1	1
Oophorectomy.....	7	2	..	9
Salpingectomy.....	2	..	1	3
Salpingo-oophorectomy.....	3	..	4	7

	CURED.	IMPROVED.	DIED.	TOTAL.
Stab wound :				
Liver	1	..	..	1
Abdomen.....	1	..	..	1
Intestinal.....	1	..	1	2
Uterine fixation :				
Alexander's.....	1	..	..	1
Ventral.....	8	2	..	10
Curettage—				
Uterus.....	44	4	..	48
Excisions —				
Glands :				
Axillary.....	2	..	..	2
Cervical.....	7	..	..	7
Inguinal.....	2	..	..	2
Hemorrhoids.....	3	1	..	4
Joints :				
Elbow.....	2	..	..	2
Hip.....	1	..	..	1
Knee.....	1	1	..	2
Wrist.....	1	..	..	1
Metatarsus.....	1	..	..	1
Ribs.....	3	2	..	5
Tumors—				
Cyst—Sebaceous.....	3	..	..	3
Epithelioma—Lip.....	1	..	..	1
Varicose veins.....	3	1	..	4

	CURED.	IMPROVED.	DIED.	TOTAL.
Fractures—				
Laminectomy .....	..	..	1	1
Wiring :				
Patella	6	1	..	7
Tibia .....	..	1	..	1
Genito-urinary (Male and Female)—				
Circumcision	19	..	..	19
Colporrhaphy :				
Anterior	2	..	..	2
Posterior	8	2	..	10
Hydrocele	7	1	..	8
Nephrectomy .....	..	..	1	1
Urethrotomy—External	2	..	..	2
Varicocele	3	1	..	4
Hernia—				
Femoral	3	..	1	4
Inguinal	9	2	1	12
Inguinal—Strangulated	2	..	1	3
Umbilical—Strangulated .....	..	..	1	1
Ventral	1	1	..	2
Incisions—				
Abscess :				
Ischio-rectal	1	..	..	1
Vulvo-vaginal	4	..	..	4
Angina Ludovici .....	..	..	1	1
Cellulitis :				
Arm	2	..	..	2
Hand	4	..	..	4

	CURED.	IMPROVED.	DIED.	TOTAL.
Knee.....	3	..	..	3
Leg.....	4	1	..	5
Mastoiditis.....	1	..	..	1
Necrosis :				
Frontal bone.....	..	1	..	1
Inferior maxilla.....	1	1	..	2
Tibia.....	1	..	..	1
Tarsus.....	1	1	..	2
Sacrum.....	1	..	..	1
Osteotomy - Genu valgum.....	..	1	..	1
Tracheotomy.....	2	..	..	2
Plastic—				
Hare lip.....	1	..	..	1
Skin grafting.....	2	..	..	2
Miscellaneous—				
Adhesions of elbow joint.....	3	2	..	5
Enucleation of eye.....	1	..	..	1
Paracentesis tympani.....	1	..	..	1
Trephining :				
Fracture of skull.....	11	..	6	17
Cerebral abscess.....	..	..	2	2
Total	264	29	33	326

Table No. V. (*Continued*)—Surgical Statistics.

FORDHAM HOSPITAL.

Surgical and Gynecological Operations.

1902.

	CURED.	IMPROVED.	DIED.	TOTAL.
Amputations—				
Arm.....	1	..	1	2
Breast.....	..	1	..	1
Fingers.....	4	..	..	4
Both legs.....	..	..	1	1
Penis.....	1	..	..	1
Thigh.....	..	..	1	1
Thumb.....	3	..	..	3
Toes.....	1	..	..	1
Cœliotomy—				
Appendicitis.....	7	..	1	8
Fecal impaction.....	..	..	1	1
Cyst, ovarian.....	1	..	..	1
Intussusception.....	..	..	1	1
Ovaritis, chronic.....	1	..	..	1
Oophoritis.....	1	..	..	1
Ovarian tumor.....	..	1	..	1
Volvulus.....	..	..	1	1
Curettage—Uterus.....	15	..	..	15
Excisions—				
Fistula in ano.....	2	..	..	2
Glands of neck.....	..	1	..	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Hemorrhoids.....	6	1	..	7
Rib.....	2	..	..	2
Toe nail.....	1	..	..	1
Tumors :				
Carcinoma, breast .....	..	..	1	1
Cyst of neck.....	1	..	..	1
Cyst over coccyx.....	1	..	..	1
Epithelioma, lip.....	1	..	..	1
Varicocele.....	7	..	..	7
Varicose veins.....	5	..	..	5
Fractures—				
Laminectomy .....	..	..	1	1
Suture of patella.....	5	1	..	6
Genito-urinary—				
Circumcision.....	1	..	..	1
Hydrocele	2	..	..	2
Orchidectomy.....	1	..	..	1
Perineorrhaphy.....	2	..	..	2
Trachelorrhaphy	3	..	..	3
Varicocele, ligation.....	2	..	..	2
Hernia, inguinal.....	2	..	..	2
Incisions—				
Abscess, ischio-rectal.....	1	..	..	1
Cellulitis of arm.....	1	..	..	1
Mastoiditis.....	..	1	..	1
Infected:				
Hand	2	..	..	2
Leg.....	1	..	..	1
Osteomyelitis... ..	1	..	..	1

	CURED.	IMPROVED.	DIED.	TOTAL.
Miscellaneous—				
Lacerated wound, thumb.....	1	..	..	1
Tenorrhaphy.....	1	..	..	1
Trephining fractured skull.....	2	1	1	4
Total.	89	7	1	106













