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144TH
ANNUAL REPORT
OF
THE SOCIETY OF
THE LYING-IN HOSPITAL
OF THE CITY OF NEW YORK



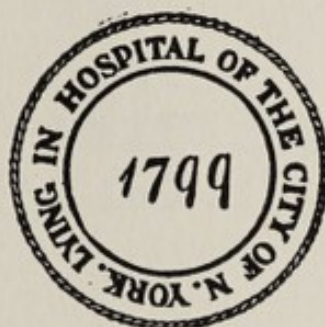
FOR THE YEAR
1942

530 EAST 70th STREET, NEW YORK, N. Y.



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1942

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THE SOCIETY OF THE LYING-IN HOSPITAL OF THE CITY OF NEW YORK

OFFICERS

LANGDON P. MARVIN	<i>President</i>
G. BEEKMAN HOPPIN	<i>Vice-President</i>
JAMES W. HUSTED	<i>Secretary</i>
HENRY S. STURGIS	<i>Treasurer</i>

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WALTER G. DUNNINGTON	LANGDON P. MARVIN
★BARKLIE HENRY	†FRANK L. POLK
G. BEEKMAN HOPPIN	†AUGUSTINE J. SMITH
JAMES W. HUSTED	HENRY S. STURGIS
WILLIAM WOODWARD	

COMMITTEES

EXECUTIVE COMMITTEE

WALTER G. DUNNINGTON	†AUGUSTINE J. SMITH
†FRANK L. POLK	HENRY S. STURGIS

FINANCE COMMITTEE

†FRANK L. POLK	HENRY S. STURGIS
WILLIAM WOODWARD	

LAW COMMITTEE

†FRANK L. POLK	WALTER G. DUNNINGTON
----------------	----------------------

NOMINATING COMMITTEE

CORNELIUS N. BLISS	†FRANK L. POLK
--------------------	----------------

MURRAY SARGENT	<i>Administrator-in-Chief</i>
GEORGE W. WHEELER, M.D.	<i>Superintendent</i>
WILLIAM H. SPILLER, M.D.	<i>Superintendent Emeritus</i>
JOHN B. PASTORE, M.D.	<i>Assistant Superintendent</i>
★HARMON J. BAILEY, M.D.	<i>Assistant to the Superintendent</i>

★In government service.

†Deceased.

REPORT OF THE GOVERNORS

Despite critical shortages in the professional staff, the Lying-In Hospital during 1942 extended its services to a greatly increased number of patients, while maintaining its customary high standards of care and treatment.

Although volunteer workers performed in noteworthy fashion to fill the gaps left by the departure of registered nurses and trained professional attendants, it was necessary during the year to curtail some activities and it is to be noted with regret that conditions have brought to a close the Hospital's association with the Berwind Free Maternity Clinic after 10 years of worthwhile cooperation. While economies and retrenchments have been instituted in other activities also, it must be emphasized that no service or procedure essential to the safety and well-being of the mothers and babies under the Hospital's care has been sacrificed, nor will it be.

The Board of Governors hereby commends the medical and nursing staffs for their sterling performance of duty in the face of unusual difficulties. Once again, too, the Ladies' Auxiliary and, under its direction, the Social Service Department, have filled vital functions. Furthermore, it would have been impossible for the Lying-In Hospital to have carried on so successfully without the continued cooperation of the various departments of the New York Hospital.

The year that lies ahead promises to be one of the most exacting and demanding in the history of the Lying-In Hospital. I am confident that it will be marked with the same record of achievement and service as the war year we have just completed.

LANGDON P. MARVIN,
President.

THE SOCIETY OF THE LYING-IN HOSPITAL OF THE CITY OF NEW YORK

Comparative Income and Expense Account

INCOME	1941	1942
Operating Income of the Lying-In Hospital		
In-Patients.....	\$359,401.34	\$402,378.91
Out-Patients.....	30,944.70	28,111.98
	<u>\$390,346.04</u>	<u>\$430,490.89</u>
Interest and Dividends.....	38,485.36	39,398.98
Real Estate, Net of Interest on Mortgage Payable.....	12,648.49	20,308.65
Trusts.....	716.71	720.78
Gifts and Miscellaneous.....	1,416.00	922.50
	<u>\$443,612.60</u>	<u>\$491,841.80</u>
Deficit, reimbursed by The Society of the New York Hospital		
From Special Funds.....	\$153,013.26	\$145,392.25
From General Funds.....	49,806.46	47,714.37
	<u>202,819.72</u>	<u>193,106.62</u>
	<u><u>\$646,432.32</u></u>	<u><u>\$684,948.42</u></u>
EXPENSES		
Operating Expenses of the Lying-In Hospital		
In-Patients.....	\$582,932.15	\$624,250.41
Out-Patients.....	60,918.38	58,339.31
	<u>\$643,850.53</u>	<u>\$682,589.72</u>
Retirement Allowances.....	1,371.96	1,371.96
Annual Report.....	711.23	400.08
Other Non-Operating Expenses.....	498.60	586.66
	<u>\$646,432.32</u>	<u>\$684,948.42</u>

HENRY S. STURGIS,
Treasurer.

MEDICAL STAFF

OBSTETRICIAN AND GYNECOLOGIST-IN-CHIEF

HENRICUS J. STANDER, M.D.

CONSULTING OBSTETRICIAN AND GYNECOLOGIST

GEORGE GRAY WARD, M.D.

ATTENDING OBSTETRICIANS AND GYNECOLOGISTS

R. GORDON DOUGLAS, M.D.

WILLIAM P. HEALY, M.D.

BYRON H. GOFF, M.D.

**HERBERT F. TRAUT, M.D.

JAMES A. HARRAR, M.D.

HERVEY C. WILLIAMSON, M.D.

ASSOCIATE ATTENDING OBSTETRICIANS AND GYNECOLOGISTS

WILLIAM H. CARY, M.D.

JOSEPH N. NATHANSON, M.D.

OGDEN F. CONKEY, M.D.

JOHN A. O'REGAN, M.D.

EDWARD H. DENNEN, M.D.

MEYER ROSENZOHN, M.D.

LYNN L. FULKERSON, M.D.

NELSON B. SACKETT, M.D.

W. HALL HAWKINS, M.D.

★FRANK R. SMITH, M.D.

ANDREW A. MARCHETTI, M.D.

†KYLE B. STEELE, M.D.

HOWARD S. McCANDLISH, M.D.

HOWARD C. TAYLOR, JR., M.D.

JOHN F. McGRATH, M.D.

LUCIUS A. WING, M.D.

ASSISTANT ATTENDING OBSTETRICIANS AND GYNECOLOGISTS

ROBERT L. CRAIG, M.D.

KATHERINE KUDER, M.D.

★RALPH W. GAUSE, M.D.

CHARLES M. McLANE, M.D.

J. RANDOLPH GEFFERT, M.D.

JOHN B. PASTORE, M.D.

★OSCAR GLASSMAN, M.D.

JACOB T. SHERMAN, M.D.

ARTHUR V. GREELEY, M.D.

★CHARLES T. SNYDER, M.D.

★CARL T. JAVERT, M.D.

RAYMOND R. SQUIER, M.D.

RESIDENT OBSTETRICIANS AND GYNECOLOGISTS

★LESLIE V. DILL, M.D.

EARL B. KING, M.D.

ASSISTANT RESIDENT OBSTETRICIANS AND GYNECOLOGISTS

★ALMON R. CROSS, M.D.

DONALD G. JOHNSON, M.D.

★ROBERT M. DUNLAP, M.D.

★RICHARD C. MORRISON, M.D.

WILLIAM F. FINN, M.D.

LELAND B. RANSOM, M.D.

ROSA HERTZ, M.D.

WILLIAM B. STROMME, M.D.

★HENRY D. HUMPHREY, M.D.

JOHN W. WALSH, M.D.

★DAVID E. WARDEN, M.D.

INTERNS

ROBERT E. BENNETT, M.D.

MORRIS HONIGMAN, M.D.

FLORENCE A. DUCKERING, M.D.

PAUL RONNIGER, M.D.

LABORATORY ASSISTANTS

ALBERTA KUDER, B.S., M.A., *Pathology*

IONA F. DAVIS, *Bacteriology*

ROY W. BONSNES, B.S., Ph.D., *Chemistry*

CESIRA MACRI, B.S., M.A., *Hematology*

NURSING STAFF

BESSIE A. R. PARKER, B.S., R.N., *Director of Nursing Service*

VERDA F. HICKCOX, B.S., R.N., *Assistant Director*

†Deceased.

★In government service.

**Resigned, November 1, 1942.

MEDICAL REPORT

To the Board of Governors

of THE SOCIETY OF THE LYING-IN HOSPITAL:

GENTLEMEN:

I have the honor to present the professional report of the Lying-In Hospital of the City of New York for the year 1942.

The past year has witnessed drastic reductions in professional and other personnel. However, it is most satisfying to note that patient care has not suffered in proportion to the decrease in the medical and nursing staffs. To provide adequate professional service to an even larger number of patients than heretofore, with a partly depleted attending staff and a house staff of eleven members, as compared to one of twenty-two a year ago, it has been necessary to discontinue many special clinics in the out-patient department, to combine some clinics and functions, to sacrifice certain portions of patients' records and to eliminate all laboratory and other procedures not absolutely essential to the well-being of the patient. In other words, it has become necessary for us to reorganize, within a relatively short space of time, the professional work of the Hospital on a scheme embodying only the bare essentials of patient care. In addition to these changes, we have been faced with a marked increase in the number of obstetrical patients. In order to care for this larger number of maternity cases, it has been necessary to discharge patients one, two or more days earlier than previously.

The great demand for doctors in our military services, resulting in a fifty per cent reduction in the resident staff of the Hospital, has forced this institution to terminate its agreement with the Berwind Free Maternity Clinic, by which we supervise and supply doctors for home deliveries. Mrs. John E. Berwind and the Berwind Board have been most understanding and cooperative in this matter. It is indeed fortunate that at the time we had to consider a reorganization of the Berwind Clinic, the Maternity Center Association wanted to extend its home delivery service conducted for the training of nurse mid-

wives. After careful consideration, a highly satisfactory arrangement was concluded last May, whereby the home confinements in the Berwind Service were taken over by the Maternity Center and its Medical Board, while such patients in that service who need hospital delivery and care are admitted to the Lying-In Hospital. Up to date this plan has worked in a most satisfactory manner, not only for the patient, but also for the training program of the Maternity Center and the teaching of abnormal obstetrics in the Cornell University Medical School.

The association between the Berwind Clinic and Cornell dates back to 1922, while that between Berwind and the Lying-In Hospital started in 1932. During these years the Cornell medical students and the Lying-In house staff obtained excellent instruction and training in that home confinement service. It was, therefore, with a great deal of regret and a consciousness of the magnitude of our loss that we were forced, by conditions beyond our control, to cease our active participation in the work of that Clinic, founded with such foresight by the late Mr. John E. Berwind. We owe a great debt of gratitude not only to him, but also to Mrs. Berwind, who for so many years not only generously supported the work, but also took an active interest in the welfare of the patients and their babies and the conduct of the various functions of the Clinic.

During the ten years of our association with the Berwind Clinic, we have delivered 6,888 babies with an infantile mortality of 2.64 per cent. The maternal mortality for the entire period is 1.45 per thousand pregnancies.

The total number of patient discharges from the Lying-In Hospital during 1942 was 8,483 as compared with 7,835 for 1941. During the past year the medical staff delivered 3,351 babies in the Hospital and in the Berwind service, cared for 4,085 obstetrical and 1,367 gynecological patients. The uncorrected maternal mortality for the year is 1.95 per thousand discharged patients, or 2.23 per thousand pregnancies. This is a slightly higher rate than the average figure of 1.98 per thousand pregnancies for the past ten and one-quarter years, during which time the Hospital obstetrical admissions totalled 42,854. The

uncorrected infantile mortality rate for 1942 was 3.103 per cent. The postoperative mortality in 1,158 gynecological operations during the year was 0.172 per cent.

The research activities in the Hospital have continued, although greatly curtailed by loss of personnel to the armed forces. The John and Mary R. Markle Foundation has continued to support our biochemical investigations in the etiology of eclampsia. We have been fortunate to obtain the full time services of Dr. Roy W. Bonsnes, formerly a member of the Department of Biochemistry in the Cornell University Medical School. He has extended the purine metabolism investigations started in 1939 by Dr. Norwood K. Schaffer and aided by the Markle Foundation. The vaginal smear research pertaining to the early diagnosis of genital cancer, conducted by Dr. George Papanicolaou of the Department of Anatomy and Dr. Herbert F. Traut of the Department of Obstetrics and Gynecology, has progressed to the stage where publication of an atlas for the guidance of those working in this field became highly desirable. These investigations, as well as the preparation and publication of this atlas, have been made possible through grants-in-aid from the Commonwealth Fund. The roentgenological investigations in pelvimetry, supported by Mr. and Mrs. Dunbar W. Bostwick, Mr. Albert C. Bostwick, Mrs. Ogden Phipps and Mrs. J. Watson Webb, have resulted in several publications dealing with the mensuration and accurate stereoscopic evaluation of contracted pelvises in the female. The untimely and sudden death on June 18, 1942, of Dr. Kyle B. Steele, who was mainly responsible for the initiation and development of these researches, has been a great loss to the Hospital. We are fortunate in having Drs. Lucius A. Wing and Charles M. McLane, who worked with Dr. Steele, to continue these investigations.

During the year Dr. Herbert F. Traut, Associate Professor of Obstetrics and Gynecology in the College, and Attending Obstetrician and Gynecologist to the Hospital, accepted the Professorship of Obstetrics and Gynecology at the University of California. His leaving was a major loss to Cornell and the Hospital, where for ten years he has been one of our outstanding teachers, investigators and clinicians. The Lying-In Hospital

and Cornell University Medical College are deeply indebted to him for the part he has played in their growth and development during the past decade.

Last summer the Cornell University Medical College entered upon the accelerated teaching program, necessitated by the war. Under this schedule medical students are taught throughout the year and thus complete their undergraduate studies in three instead of four years. The members of the medical staff of the Hospital have been more than willing to assume the added teaching duties resulting from this new curriculum.

To the Board of Governors and to the Ladies' Auxiliary Board I wish to express my gratitude for the support rendered the Lying-In Hospital.

HENRICUS J. STANDER,
Obstetrician and Gynecologist-in-Chief.

REPORT OF NURSING ACTIVITIES

The year 1942 has been one of constant change and adjustment coincident with the country's change from a peace to a wartime economy. Our chief preoccupation has been the maintenance of a safe standard of service with an ever decreasing nursing staff as more and more withdrew for military or other duty. Twenty-eight who left during the year are located at military hospitals in this country or are serving the fighting forces abroad. Nine of these are in the Ninth General Hospital stationed at Fort Devens, Massachusetts. Four are with army units in Africa. Resignations reduced the number of graduate nurses on the staff by 32 per cent during the year and by the end of 1942 the total staff, including both professional and supplementary workers, showed a decrease of 25 per cent.

The numerical reduction has been perhaps of less significance than the change in composition. The employment of practical nurses, begun in 1941, has steadily increased and additional attendants have been appointed. Resignations from the latter group were showing a decided tendency to rise by the end of the year, a matter for serious consideration owing to the basic nature of their work in the program of patient care. Whereas the budget provides that graduate nurses comprise 81 per cent of the staff, at the end of the year only 52 per cent of the reduced staff were graduate nurses.

The greatest problems have been due to the loss of our older nurses who were well acquainted with the routines and procedures of the department. Formerly, the great majority of staff members had been with us from three to ten years. By the end of 1942, thirty-eight of our sixty-seven graduates had been employed less than a year and thirty-two of that number less than six months. The difficulty of maintaining established nursing procedures and administrative policies under these conditions is apparent, and great credit is due the head nurses and supervisors who have held to their standards, patiently and conscientiously introducing and supervising an ever changing group.

Fortunately, the change has been fairly gradual and has allowed some time for psychological as well as physical adjust-

ments. Since actual nursing procedures and care have always been conducted along essential rather than luxury lines, little could be eliminated, but certain duties have been reallocated to the growing staff of practical nurses and to Red Cross Volunteer Nurses' Aides. The latter group contributed the equivalent of 233 eight-hour days. Nurses were relieved of some of the clerical work by other volunteers who gave a total of 198 eight-hour days. Medical students were most helpful in the labor and delivery rooms.

A well organized nursing service scrupulously maintained provides excellent instruction in general hygiene for the patient. Good maternity nursing not only demands but lends itself to a close-knit and well integrated program of instruction for the mother on the care of herself and her baby. The main educational value to the patient of such a nursing regime lies in its simplicity and continuity. There are signs that at present this is less effective than formerly. The constant adjustments by which the head nurses must secure the safety and physical comfort of the mothers and their babies destroys the continuity of service, with the result that the patient learns little from her hospital experience. The principle that a decrease in opportunities for incidental learning must be met with increased planned instruction would seem to apply here.

Fifty-nine undergraduate students have completed the course in obstetrical nursing conducted at the Lying-In Hospital. Forty-five of these were students of the Cornell University-New York Hospital School of Nursing and fourteen from the Moses Taylor Hospital School of Nursing in Scranton, Pennsylvania. Seventeen graduates completed the course, representing fourteen hospitals in ten states and two foreign countries, China and Costa Rica. Though there was a substantial increase in the number of our own students assigned to the department, the total was less than last year because of the marked decrease in graduate students due to recruitment for military services.

I cannot close this report without expressing my heartfelt appreciation to those who have helped us meet the unusual demands of the year. I am grateful to those who answer for us in the armed forces of the United States; no less to the super-

visors and head nurses who have carried this essential service at home, together with the student program so necessary to the national plan for military and civilian health. Some of the private duty nurses have accepted assignment to the Hospital pavilions, serving with faithfulness and a fine disregard for personal interest. It is not without sacrifice, both personal and on the part of their families, that married or retired nurses have readjusted their lives to resume active duty, on a full or part time basis. I am especially indebted to our chief, Dr. Henricus J. Stander, for his counsel.

Respectfully submitted,

VERDA F. HICKCOX, R.N.

LADIES' AUXILIARY
TO THE
SOCIETY OF THE LYING-IN HOSPITAL

REPORT OF THE PRESIDENT FOR THE YEAR 1942

The increasing birth rate in the past year has resulted in greater problems for our workers.

The Maternal Welfare Sewing Class, which was discontinued in 1941 for lack of funds, has been taken over by Mrs. Allan Locke and Mrs. E. Farrar Bateson, who have conducted it for more than a year. This class had an attendance of 100 women and fills a real need.

Mrs. Locke reported that the garments to be given out were cut at the House of Industry and beautifully sewed by the American Women's Voluntary Service. In 1942 we gave out 28 layettes.

The Babies' Alumni Fund, founded by Mrs. Crawford Burton to provide means for special purposes, has again brought in a substantial sum. A donation for special purposes was also given, the spending of which is subject to the approval of the donor.

Our Occupational Therapy has continued with great success and Mrs. Caroline Oppenheimer, our therapist, has given very generously of her time not only on the carcinoma floor for which she was originally engaged, but also in the pavilions. The articles made are most attractive and salable and that department is on a self-supporting basis.

We regret to report the resignation from the Board of Mrs. Gordon Harrower who has been replaced by Mrs. Fred Searls. Mrs. Henry R. Hoyt, who resigned in 1941, has been reelected to the Board.

Mrs. Allan Locke again headed the team for the Women's Division of the United Hospital Fund and reported a total of \$6,361.50 received from 143 donors, an appreciable increase over last year.

In closing, I wish to thank all the members of the Board of Governors and the staff for their continued cooperation.

HELEN PORTER PRYBIL,
President.

REPORT OF THE SOCIAL SERVICE DEPARTMENT

1942

I have the honor to submit the annual report of the Social Service Department for 1942.

During the past year there has been an increase in the individual case worker's load from an average of 53 cases per month in 1941 to 72 in 1942. Despite this increase in case load, the expenditures for relief have decreased. This indicates that the obvious problems of financial relief have been replaced in a measure by the more subtle problems of lives and homes upset by the exigencies of war.

The department has taken advantage of the increased volunteer service and has gratefully utilized the volunteers not only for clerical duties but for home visiting (under case worker's supervision), in the management of a playroom (a new project that has met with great success) and aiding the Occupational Therapist. In addition to this, two members of our Ladies' Auxiliary Board, Mrs. Allan Locke and Mrs. E. Farrar Bateson, rendered invaluable service by their volunteer efforts in conducting the sewing class for mothers.

The Occupational Therapy Department has continued under the direction of Mrs. Caroline Oppenheimer, who joined the department in April of this year. As the articles made are sold to the public, ingenuity must be displayed not only in suiting the craft to the patient but to producing salable items, and in this combination the work has been most successful.

The free lending library for out-patients was more popular this year than ever before. The original grant for the purchase of books was exhausted and replacements were badly needed until Mrs. Crawford Burton generously donated twenty-nine books and an anonymous cash donation further bolstered the titles on hand.

The usual lectures to the student nurses were made by the Director, who appreciated this opportunity of interpreting medical social work to them.

Each year we take this opportunity to express our very sincere gratitude to those with whom we have worked in the Hospital during the year and whose cooperation makes our work possible. To the Ladies' Auxiliary Board we give our deepest gratitude for their kind help and understanding.

Respectfully submitted,

VIRGINIA T. KINZEL.

LADIES' AUXILIARY TO THE SOCIETY OF THE LYING-IN HOSPITAL

January 1, 1942 to December 31, 1942
(From Report of the Treasurer)

CASH ON HAND, JANUARY 1, 1942..... \$3,602.30

RECEIPTS

ANNUAL DUES

Patrons.....	\$ 300.00	
Associates.....	100.00	
Contributing.....	425.00	
Sustaining.....	700.00	\$1,525.00

DONATIONS

United Hospital Fund.....	\$2,360.15	
Greater New York Fund.....	1,139.85	
Mrs. Morgan Hamilton.....	300.00	
Mrs. H. L. Satterlee.....	60.00	
Mrs. Paul G. Pennoyer.....	20.00	3,880.00

CHRISTMAS FUND FOR EMPLOYEES..... 39.50

\$5,444.50

BABIES' ALUMNI FUND DUES..... 1,178.85

SPECIAL GIFT FUND

Mrs. Paul Pryibil..... 1,000.00

Total Receipts..... \$7,623.35

DISBURSEMENTS

Salaries.....	\$8,245.81	
Postage, printing and stationery.....	9.75	
Christmas gifts to employees.....	32.00	
Auditing.....	35.00	
Welfare Council of the City of New York— dues.....	10.00	\$8,332.56

FROM BABIES' ALUMNI FUND

Relief.....	\$ 200.00	
Sewing Class.....	249.22	
Conference expenses and petty cash.....	225.00	
Printing and stationery.....	63.80	
Postage.....	53.00	
Occupational therapy.....	4.29	795.31

Total Disbursements..... 9,127.87

EXCESS OF DISBURSEMENTS OVER RECEIPTS..... 1,504.52

BALANCE, CASH ON HAND, DECEMBER 31, 1942..... \$2,097.78

Respectfully submitted,

ROSINA O. BATESON,
Treasurer.

LADIES' AUXILIARY TO THE SOCIETY OF THE LYING-IN HOSPITAL 1942

OFFICERS

MRS. PAUL PRYIBIL	<i>President</i>
MRS. CRAWFORD BURTON	<i>First Vice-President</i>
MRS. ALLAN S. LOCKE	<i>Second Vice-President</i>
MRS. E. FARRAR BATESON	<i>Treasurer</i>
MRS. WM. A. W. STEWART	<i>Assistant Treasurer</i>
MRS. ALEXANDER P. MORGAN	<i>Recording Secretary</i>
MRS. FRANK F. RUSSELL	<i>Corresponding Secretary</i>

MEMBERS OF THE BOARD OF THE LADIES' AUXILIARY

MRS. E. FARRAR BATESON	MRS. C. V. S. MITCHELL
MRS. CRAWFORD BURTON	MRS. ALEXANDER P. MORGAN
MRS. LEWIS B. HARDER	MRS. FREDERICK H. PRINCE, JR.
MRS. BARKLIE MCKEE HENRY	MRS. PAUL PRYIBIL
MRS. HENRY R. HOYT	MRS. FRANK F. RUSSELL
MRS. ALLAN S. LOCKE	MRS. FRED SEARLS, JR.
MRS. HUNTER S. MARSTON	MRS. WM. A. W. STEWART
MRS. J. FIFE SYMINGTON, JR.	

ADVISORY COMMITTEE

MRS. MORGAN HAMILTON	MRS. JOHN C. HUGHES, JR.
MRS. PAUL PENNOYER	

MRS. PAUL PRYIBIL	<i>Chairman of Executive Committee</i>
MRS. ALLAN S. LOCKE	<i>Chairman of House Committee</i>
MRS. CRAWFORD BURTON	<i>Chairman of Volunteer Committee</i>
MRS. CRAWFORD BURTON	<i>Chairman of Babies' Alumni Fund</i>
MRS. WM. A. W. STEWART	<i>Chairman of Library Committee</i>

LADIES' AUXILIARY TO THE SOCIETY OF THE LYING-IN HOSPITAL

Alker, Mrs. Carroll B.
Anderson, Mrs. Henry H.
Andrews, Mrs. DeLano
Auchincloss, Mrs. J. Howland
Baring-Gould, Mrs. Sabine L.
Barney, Mrs. Charles Tracy
Bartow, Mrs. Francis D.
Bateson, Mrs. E. Farrar
Bleecker, Mrs. Lyman C.
Bodman, Mrs. Herbert L.
Braman, Mrs. Chester A.
Brown, Mrs. Donald W.
Budd, Mrs. Kenneth P.
Burden, Mrs. W. Douglas
Burrill, Mrs. Middleton S.
Burton, Mrs. Crawford
Bush, Mrs. Donald F.
Canfield, Mrs. Cass
Carhart, Mrs. Harold W.
Cheney, Mrs. Ward
Clark, Mrs. Frederic G.
Clarke, Mrs. George Hyde
Cogswell, Mrs. William F.
Collier, Mrs. Price
Cromwell, Mrs. Jarvis
Cushman, Mrs. Paul
Davis, Mrs. Asa B.
Dickey, Mrs. Charles D.
Emmons, Mrs. Weld
Foley, Mrs. Edward H., Jr.
Frick, Mrs. Childs
Gardner, Mrs. Paul E.
Gates, Mrs. Artemus L.
Gould, Mrs. Edwin
Greer, Mrs. Louis M.
Greve, Mrs. William M.
Hall, Mrs. J. Kenneth
Hamilton, Mrs. Morgan
Hammond, Mrs. Paul L.
Hard, Mrs. DeCourcy L.

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Morgan, Mrs. Henry S.

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Persons may contribute toward the endowment of beds in the Society's Hospital by the payment of a sum not less than \$7,500, the annual income from which will be applied to the cost of maintaining a free bed in one of the wards so far as such income will suffice to pay such cost. Persons making such payments shall have such rights in respect to naming patients to the Society for treatment as the Governors shall from time to time prescribe.—EXTRACT FROM BY-LAWS.

- 1895 MR. AND MRS. GEORGE G. WILLIAMS. *In Memory of* MRS. ROBERT L. STUART
 1902 ANNA WOERISHOFFER. *In Memory of* ANTOINETTE, COUNTESS SEILERN
 1912 MRS. GEORGE P. EUSTIS. *In Memory of her mother,* LUCY MORGAN STREET
 1912 ANNA WOERISHOFFER. THE ANNA WOERISHOFFER BED
 1914 LILLA GAITES. THE MARIE STUART BED
 1916 HENRY CLAY FRICK
 1928 ESTATE OF HENRI D. DICKINSON. *In Memory of* IDA MAY DICKINSON

MEMBERS OF THE SOCIETY

A person subscribing to the funds of the Society a sum not less than five dollars, providing his subscription is accepted by the Board, upon being duly nominated and elected by the Governors, may become a member of the Society.

	WHEN ELECTED		WHEN ELECTED
Arthur M. Anderson.....	1927	James W. Husted.....	1943
Vincent Astor.....	1932	Arthur Iselin.....	1928
Robert Lenox Banks.....	1893	William Harding Jackson.....	1939
Francis D. Bartow.....	1927	G. Hermann Kinnicutt.....	1912
Waldron Phoenix Belknap.....	1881	Thomas W. Lamont.....	1922
Cornelius N. Bliss.....	1928	H. G. Lloyd.....	1922
George T. Bowdoin.....	1927	Langdon P. Marvin.....	1933
Nicholas Murray Butler.....	1904	Stephen Merselis.....	1923
Joseph H. Choate, Jr.....	1928	Henry Sturgis Morgan.....	1927
John H. Davis.....	1896	†J. Pierpont Morgan, Jr.....	1905
Wm. North Duane.....	1914	Junius Spencer Morgan, Jr.....	1920
Walter G. Dunnington.....	1939	Williamson Pell.....	1935
Guy Emerson.....	1922	Paul G. Pennoyer.....	1922
William Ewing.....	1927	†Frank L. Polk.....	1923
R. Horace Gallatin.....	1928	Herbert L. Satterlee.....	1914
Thomas S. Gates.....	1922	†Augustine J. Smith.....	1928
Richard T. H. Halsey.....	1902	Henry S. Sturgis.....	1939
W. Pierson Hamilton.....	1897	George Whitney.....	1922
Barklie Henry.....	1932	John Hay Whitney.....	1928
G. Beckman Hoppin.....	1928	Bronson Winthrop.....	1887
William Woodward.....	1928		

†Deceased.

DISTRIBUTION OF BEDS

PRIVATE.....	26		
SEMI-PRIVATE.....	20		
PAVILION.....	144	190	
	<hr/>		
NEWBORN.....		142	332
		<hr/>	

DISCHARGES

OBSTETRICAL

Private.....	536		
Semi-Private.....	414		
Pavilion.....	2,975	3,925	
	<hr/>		

GYNECOLOGICAL

Private.....	168		
Semi-Private.....	183		
Pavilion.....	1,016	1,367	5,292
	<hr/>	<hr/>	
NEWBORN.....			3,191
TOTAL			8,483

STATISTICS

OBSTETRICAL DEPARTMENT

INDOOR SERVICE

(January 1, 1942—December 31, 1942)

BERWIND (OUTDOOR) SERVICE

(January 1, 1942—May 31, 1942)

TOTAL DISCHARGES	<i>Lying-In Indoor</i>	<i>Berwind Outdoor</i>	<i>Total</i>
Abortion, operative.....	185		185
Abortion, spontaneous.....	88		88
Full term operative delivery.....	807	5	812
Full term spontaneous delivery.....	2,245	151	2,396
Premature operative delivery.....	35	1	36
Premature spontaneous delivery.....	64	3	67
Discharged before delivery.....	429		429
Infant boarder.....	19		19
Not pregnant.....	8		8
Postpartum.....	63		63
Died undelivered.....	1		1
Total.....	3,944	160	4,104

TOTAL INFANTS (FULL TERM AND PREMATURE)

Total deliveries.....	3,311
Multiple pregnancy (Twins).....	40
Total.....	3,351

RACE (FULL TERM AND PREMATURE DELIVERIES AND ABORTIONS)

White.....	3,459
Colored.....	125
Total.....	3,584

ECTOPIC PREGNANCY

Tubal.....	15
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SYPHILIS (DELIVERIES AND ABORTIONS)

	<i>Lying-In Indoor</i>	<i>Berwind Outdoor</i>	<i>Total</i>
Lues, no lesions, Wassermann or Kline reaction negative.....	27	8	35
Lues, no lesions, Wassermann or Kline reaction positive.....	29	10	39
Total.....	56	18	74

Incidence of Syphilis (unknown cases excluded) = 2.100%

TOXEMIA (DELIVERIES AND ABORTIONS, INDOOR SERVICE)

Eclampsia, antepartum.....	2
intrapartum.....	1
postpartum.....	3
Hypertensive disease.....	42
Pre-eclampsia, mild.....	102
Pre-eclampsia, severe.....	23
Renal disease.....	6
Unclassified.....	65
Total.....	244

Incidence of toxemia = 7.12%

TYPE OF PELVIS (NOT INCLUDING ABORTIONS)

	<i>Lying-In Indoor</i>	<i>Berwind Outdoor</i>	<i>Total</i>
Normal.....	2,827	146	2,973
Flat simple.....	41		41
Funnel typical.....	46	3	49
Funnel flat.....		6	6
Generally contracted typical.....	38		38
Generally contracted funnel.....	8		8
Rachitic flat.....	3		3
Rachitic, generally contracted.....	1		1
Rachitic, generally contracted funnel..	2		2
Not measured.....	185	5	190
Total.....	3,151	160	3,311

PRESENTATION (NOT INCLUDING ABORTIONS)

	<i>Lying-In</i> <i>Indoor</i>	<i>Berwind</i> <i>Outdoor</i>	<i>Total</i>
No record.....	44	10	54
L.O.A.....	1,687	85	1,772
L.O.T.....	86	1	87
L.O.P.....	95	1	96
L.O.P. (Posterior rotation).....	2		2
O.A. (Primary).....	23	2	25
O.P. (Primary).....	12		12
R.O.A.....	707	45	752
R.O.T.....	87	1	88
R.O.P.....	140	5	145
R.O.P. (Posterior rotation).....	2	1	3
Breech.....	141	7	148
Brow.....	1		1
Face.....	11	1	12
Transverse.....	5		5
Compound.....	1		1
Not determined.....	2		2
Vertex (Not Differentiated).....	105	1	106
Total.....	3,151	160	3,311

OPERATIONS (FULL TERM AND PREMATURE DELIVERIES)

	<i>Lying-In</i> <i>Indoor</i>	<i>Berwind</i> <i>Outdoor</i>	<i>Total</i>
Forceps			
Low.....	478	1	479
Mid.....	91		91
High.....	2		2
Total.....	571	1	572

Incidence of forceps = 17.27%

Breech extraction.....	130	5	135
Version and extraction.....	9		9
Tamponade of uterus.....	4		4
Manual removal of placenta.....	18		18
Episiotomy (Spontaneous and Operative deliveries).....	1,876	13	1,889
Repair third degree laceration (Spontaneous and Operative deliveries)...	22		22
Insertion of bag.....	4		4
Duhrssen's incision of cervix.....	4		4
Destructive operation, infant.....	4		4
Laparotomy—ruptured uterus.....	2		2

Cesarean Section	
Classical.....	34
Low cervical.....	59
Latzko.....	6
Section with sterilization.....	17
Total.....	116

Incidence of Cesarean Section = 3.503%

INDICATIONS FOR CESAREAN SECTION

Breech.....	1
Cardiac disease.....	1
Cerebral accident.....	1
Cervical dystocia.....	3
Contracted pelvis.....	17
Disproportion.....	11
Elderly primigravida.....	17
Face presentation.....	1
Long labor.....	3
Myomectomy.....	2
Placenta praevia.....	13
Premature separation.....	4
Previous cesarean section.....	29
Previous vaginal repair.....	2
Ruptured uterus.....	1
Toxemia—hypertensive disease.....	2
severe pre-eclampsia.....	3
renal disease.....	1
Transverse presentation.....	1
Tuberculosis.....	2
Urinary tract infection (bilateral).....	1
Total.....	116

HEMORRHAGE (NOT INCLUDING ABORTIONS)

	<i>Lying-In</i> <i>Indoor</i>	<i>Berwind</i> <i>Outdoor</i>	<i>Total</i>
Antepartum			
Placenta praevia.....	15		15
Premature separation.....	10		10
Postpartum.....	66		66

Incidence of Postpartum Hemorrhage

600 cc. or over, Cesarean Sections not included = 2.065%

MORBIDITY (FULL TERM AND PREMATURE DELIVERIES)

By "Puerperal Infection" is meant a rise in temperature to 100.4° F. (38.° C.) occurring once during each of two twenty-four-hour periods following delivery or remaining elevated longer than 24 hours, excluding the first 24 hours after delivery, unless the rise in temperature is definitely proven to be due to other causes, such as mastitis, pyelitis, or intercurrent infection. Morbidity includes all cases of Puerperal Infection and all those febrile from other causes. A temperature elevated to 100.4° F. (38.° C.) once, or of only 24 hours' duration, is a One Day Fever, and not included in the morbidity figure. The temperatures are taken on the Indoor Service as follows: 6-10 a.m., 2-6-10 p.m., unless otherwise ordered. The temperatures on the Outdoor Service are taken by the visiting nurse once a day at the time of her routine visit, unless otherwise ordered.

	<i>Lying-In Indoor</i>	<i>Bedward Outdoor</i>	<i>Total</i>
Afebrile.....	2,481	151	2,632
One day fever.....	398	5	403
Febrile, puerperal infection.....	182	4	186
mastitis.....	32		32
pyelitis.....	6		6
intercurrent disease.....	19		19
other.....	32		32
No puerperium.....	1		1
Total.....	3,151	160	3,311

Incidence of morbidity—Indoor Service
(abortions not included) = 8.632%

Incidence of morbidity—Indoor Service
(abortions included) = 8.615%

Incidence of puerperal infection—Indoor Service
(abortions not included) = 5.807%

Incidence of puerperal infection—Indoor Service
(abortions included) = 5.928%

MATERNAL MORTALITY

	<i>Discharges</i>	<i>Deaths</i>
Lying-In Hospital (Indoor).....	3,925	8
Berwind Service (Outdoor).....	160	0
	<hr/>	<hr/>
Total.....	4,085	8

MATERNAL DEATHS (All patients on the Berwind Outdoor Service requiring hospitalization are transferred to the Lying-In Hospital)

Eight maternal deaths in 4,085 discharged patients.

Gross maternal mortality (including abortion, ectopic and other) = 0.195% or 1.95 per thousand discharged patients or 2.23 per thousand pregnancies.

The eight deaths were as follows:

1. Antenatal patients (dying before delivery).....	1
2. Postpartum (full term and premature deliveries).....	4
3. All other patients (abortions and postpartum admission). ..	3
	<hr/>
Total.....	8

INFANTILE MORTALITY

Total infantile mortality includes all full term and premature infants, deadborn, stillborn, or dying within 14 days following birth in the Lying-In Hospital Indoor Obstetrical Service and Berwind Outdoor Obstetrical Service. An abortion is any fetus weighing less than 1,500 grams, or measuring less than 35 cm. in length. Abortions are not included in the Total Infantile Mortality.

	<i>Total Infants</i>	<i>Deadborn and Stillborn</i>	<i>Neonatal Deaths</i>	<i>Total</i>
Lying-In Hospital (Indoor Service).....	3,191	57	43	100
Berwind Service (Outdoor Service).....	160	4		4
	<hr/>	<hr/>	<hr/>	<hr/>
Total.....	3,351	61	43	104

Gross Infantile Mortality = 3.103%

MATERNAL MORTALITY FOR PERIOD

September 1, 1932—December 31, 1942

PAVILION, PRIVATE AND BERWIND OUTDOOR SERVICES

During this period there were 75 deaths in 42,854 discharged patients; a maternal mortality rate of 0.175 per cent, or 1.75 per 1,000 patients discharged, or 1.98 per 1,000 pregnancies. The causes of death in these patients are shown in the following table:

Cause of Death	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	Total	Grand Total	Per Cent Total
Infection														
Antepartum.....	1	1	17	22.7
Postpartum														
Puerperal Infection.....	..	1	1	..	2	..	..	..	..	..	..	4
Peritonitis following Cesarean Section.....	..	..	..	2	2	1	..	1	..	..	..	6
Peritonitis following ruptured Appendix.....	..	..	..	..	..	..	..	..	1	..	1	2
Postabortal.....	1	..	1	2	4	6	8.0
Pneumonia														
Antepartum.....	1	..	..	1	..	..	..	..	..	..	..	2
Postpartum.....	1	1	..	1	..	1	4	16	21.3
Hemorrhage														
Antepartum														
Placenta previa.....	..	..	..	1	..	..	..	..	..	..	..	1
Premature separation.....	..	..	1	..	1	1	..	..	..	..	..	3
Postpartum														
Vaginal Delivery.....	1	..	..	1	..	2	1	..	1	..	..	6
Following Cesarean Section.....	2	1	3	4	5.3
Ruptured Uterus.....	..	1	..	..	..	..	..	..	1	..	..	2
Ectopic Pregnancy.....	..	..	..	..	..	..	..	..	..	..	1	1
Toxemia														
Acute Yellow Atrophy.....	..	1	1	1	3	9	12.0
Eclampsia.....	..	..	..	..	..	1	..	..	..	..	..	1
Cardiac Disease														
Antepartum.....	..	1	..	1	1	1	1	5	10	13.3
Postpartum.....	..	..	..	1	1	1	1	..	..	..	..	4
Embolus.....	1	..	2	1	1	..	1	3	1	10	2	2.8
Pyelonephritis.....	..	1	..	1	..	..	..	..	..	..	..	2
Anesthesia.....	..	1	1	2	3	4.0
Cerebro-vascular Accident.....	..	..	..	1	1	..	..	..	1	..	..	3
Tuberculosis, Miliary.....	1	1	1	1.3
Chorioepithelioma (Postpartum).....	..	..	..	..	1	..	..	..	..	..	..	1
Blood Dyscrasia—erythroblastic splenomegaly.....	1	1	1	1.3
Suicide (undelivered).....	..	..	..	1	..	..	..	..	..	..	..	1
Colitis, Subacute.....	1	1	1	1.3
Not Determined (Insufficient Data).....	..	..	..	..	..	1	..	..	..	..	..	1
Total.....	4	7	6	14	11	8	4	2	7	4	8	75	75	100.0

STATISTICS

GYNECOLOGICAL DEPARTMENT

1942

TOTAL DISCHARGES..... 1,367

Race

White.....	1,304
Colored.....	63

Total.....	1,367
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DIAGNOSIS ON DISCHARGE

VULVA

Bartholin gland abscess or cyst.....	15
Condylomata accuminata.....	2

VAGINA AND PERINEUM

Cystocele, rectocele or both.....	271
Old perineal laceration.....	34
Relaxed outlet.....	263
Vaginitis.....	20

CERVIX

Carcinoma.....	41
Cervicitis.....	201
Laceration.....	110
Myoma.....	9
Polyp.....	83

UTERUS

Adenomyoma.....	10
Carcinoma.....	18
Endometritis.....	22
Hyperplasia of the endometrium.....	138
Menorrhagia.....	450
Metrorrhagia.....	229
Myoma.....	307
Polyp.....	98
Procidentia.....	86
Retroversion.....	117
Sarcoma.....	2

TUBE

Hydrosalpinx.....	4
Pyosalpinx.....	1
Salpingitis.....	70

OVARY

Abscess.....	3
Carcinoma.....	12
Cyst, not simple.....	58
Dermoid cyst.....	11
Endometriosis.....	32
Parovarian cyst.....	4
Simple retention cyst.....	86

OTHER CONDITIONS

Gonorrhea.....	39
Syphilis.....	34

OPERATIONS

Major.....	378
Minor.....	765
Other.....	15
Total.....	1,158

VULVA AND VAGINA

Incision and drainage of Bartholin gland cyst or abscess. . .	11
Colporrhaphy.....	194
Perineorrhaphy or perineoplasty.....	2
Vulvectomy.....	3

CERVIX

Amputation.....	118
Biopsy.....	41
Cauterization or coagulation.....	46
Dilatation of cervix.....	38
Dilatation and curettage.....	624
Myomectomy.....	3
Removal of polyp.....	37
Trachelorrhaphy.....	11

UTERUS

Hysterectomy, abdominal subtotal.....	223
Hysterectomy, abdominal total.....	32
Hysterectomy, vaginal.....	3
Myomectomy.....	24
Suspension.....	44

TUBE

Rubin's test.....	40
Plastic operation.....	2
Salpingectomy.....	167

OVARY

Oophorectomy.....	150
Oophorocystectomy.....	47

MISCELLANEOUS

Appendectomy.....	72
Exploratory laparotomy.....	13
Radium therapy.....	52
Patients receiving transfusions.....	89

MORTALITY

Deaths.....	7
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Gross mortality = 0.512%

Of these there were 2 postoperative deaths which occurred
in 1,158 major and minor operative cases.

Postoperative mortality = 0.172%

SUMMARY OF OBSTETRICAL AND GYNECOLOGICAL SERVICES

September 1, 1932—December 31, 1942

TOTAL NUMBER

Obstetrical adult patients (Indoor, Outdoor, Berwind)....	41,854
Infants (Indoor, Outdoor, Berwind).....	36,362
Gynecological patients.....	10,994
Grand Total.....	89,210

MORTALITY ON THE GYNECOLOGICAL SERVICE

FOR THE PERIOD

September 1, 1932—December 31, 1942

During this period there were 77 deaths in 10,994 discharged patients, giving a gross mortality of 0.700% or 7.00 per thousand patients discharged.

OPERATIONS		<i>Deaths</i>
Major.....	3,306	31
Minor.....	5,930	14
Total.....	9,236	45

Incidence of postoperative mortality = 0.487%
(4.87 per thousand)

The causes of death in these 77 patients are shown in the following table:

	1932	1933	1934	1935	1936	1937	1938	1939	1940	1941	1942	Total
Angio-fibrosarcoma of broad ligament...	1	..	..	..	..	1
Carcinoma of Bladder.....	1	..	1
Carcinoma of Cervix.....	1	..	1	1	..	1	1	..	..	5
Carcinoma of Colon.....	1	1	..	2
Carcinoma of Ovary.....	..	1	3	3	..	..	..	4	6	2	2	21
Carcinoma of Tube.....	1	1
Carcinoma of Urethra.....	1	..	..	..	..	1
Carcinoma of Uterus.....	1	..	..	..	1	1	1	1	1	6
Carcinoma of Vagina.....	1	..	..	..	..	..	1
Cardiac Failure.....	1	..	..	..	..	..	1
Coronary Thrombosis.....	1	..	..	..	..	1
Diabetes.....	1	1
Hemorrhage, Cerebral.....	1	..	..	..	..	..	..	..	1
Hemorrhage, Cervical Myoma.....	..	1	..	..	..	..	..	..	..	..	..	1
Krukenberg Tumor.....	..	1	..	..	..	..	..	..	..	..	..	1
Malignant Melanoma.....	1	..	..	..	..	..	1
Narcosis (gas, oxygen, ether).....	1	1	..	..	..	2
Pelvic Inflammatory Disease.....	1	..	..	..	..	..	1
Pelvic Malignancy (Type?).....	1	1	..	..	..	..	..	..	..	2
Peritonitis.....	..	1	1	1	..	..	1	..	..	..	..	4
Pneumonia.....	1	1	..	1	..	..	..	..	3
Pulmonary Embolus.....	1	1	..	..	..	..	..	1	2	4	1	10
Ruptured Appendix.....	1	1	..	..	..	..	2
Sarcoma of Ovary.....	1	..	..	..	..	..	..	1
Sarcoma of Pancreas.....	1	1
Sarcoma of Uterus.....	..	1	..	..	..	..	..	2	..	1	..	4
Uremia.....	1	..	1
Total.....	1	6	7	7	3	6	8	10	11	11	7	77

PUBLICATIONS OF THE MEMBERS OF THE MEDICAL
STAFF OF THE LYING-IN HOSPITAL

1942

Department of Obstetrics and Gynecology

- DILL, L. V., CADDEN, J. F., ISENHOUR, C. E. and SCHAFFER, N. K., Glomerular Infiltration and Renal Blood Flow in the Toxemias of Pregnancy, *Am. J. Obst. & Gynec.*, 43: 32, 1942.
- KUDER, K. and ISENHOUR, C. E., The Effect of Parity on the Average Blood Pressure and on the Incidence of Hypertension, *Am. J. M. Sc.* 203: 333, 1942.
- ROBINSON, C. E., CADDEN, J. F. and ISENHOUR, C. E., Glomerular Filtration and Renal Blood Flow in "Normal" Patients Following Toxemias of Pregnancy, *Am. J. Obst. & Gynec.* 44: 66, 1942.
- ROBINSON, C. E., ISENHOUR, C. E. and CADDEN, J. F., Glomerular Filtration and Renal Blood Flow in the Hypertensive Woman and in Posttoxic Hypertension, *Am. J. Obst. & Gynec.* 44: 612, 1942.
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SUGGESTED FORM OF BEQUEST

I give and bequeath to THE SOCIETY OF THE
LYING-IN HOSPITAL OF THE CITY OF
NEW YORK, incorporated by the Legislature of
the State of New York in the year 1799, the sum
of.....Dollars, to be
applied to the use and benefit of the said Society
under the direction of the Governors thereof.





