

Annual report of the Peter Bent Brigham Hospital : 1935.

Contributors

Peter Bent Brigham Hospital.

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PETER BENT BRIGHAM
HOSPITAL --- BOSTON

TWENTY-SECOND
ANNUAL REPORT
FOR THE YEAR 1935



1936

FORM OF BEQUEST

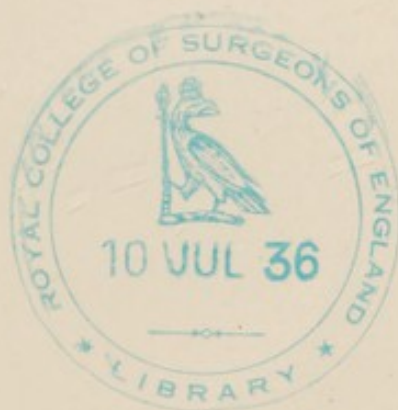
I give and bequeath to the Peter Bent Brigham Hospital, a Corporation established under the laws of the Commonwealth of Massachusetts, the sum of _____ dollars, the same to be used for the furtherance of its charitable work.



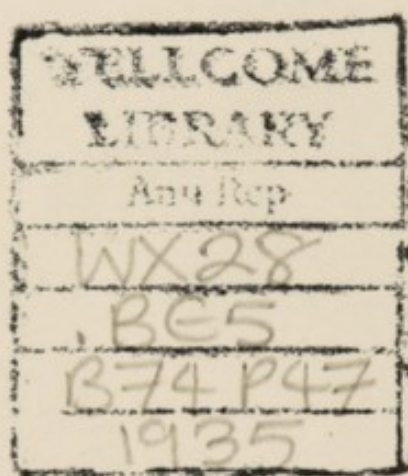
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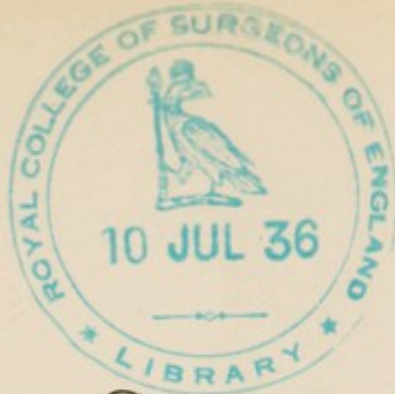
TWENTY-SECOND ANNUAL REPORT
OF THE
PETER BENT BRIGHAM
HOSPITAL

FOR THE YEAR
1935




1936





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President's Report

THE RESIGNATION of Mr. Harry L. Bailey, a member of the Corporation since 1925, was accepted with regret.

Dr. C. Sydney Burwell, recently appointed Dean of the Harvard Medical School, accepted the position of Physician on September 1, 1935.

Dr. Alvah H. Gordon, Visiting Physician to the Montreal General Hospital and Associate Professor of Medicine at McGill University, served as Physician-in-Chief *pro tem* from April 14 to 20, 1935.

During the past year, many meetings were held by public-spirited persons and representatives of the hospitals and charitable societies of Boston to consider the adoption of a permanent joint form of raising funds for the support of the charities of Boston. Following these meetings, the Community Federation was formed, and through its efforts, a large fund was subscribed. The Trustees here place on record their gratitude to these public-spirited citizens who gave so much of their time and effort to obtain subscriptions to this Community Federation Fund. The staff and employees of the hospital subscribed a substantial sum, and in addition, they voluntarily accepted a large reduction in wages which went far to enable the hospital to continue its charitable work.

We thank the members of the Ladies' Social Service Committee for their work in helping support the Social Service Department which has become so essential to the successful treatment of patients in the hospital.

There are 247 beds in the hospital, of which 187 beds, or 76%, on the average were occupied by patients during the past year. It is worthy to note that the beds

PETER BENT BRIGHAM HOSPITAL

of the hospitals of this country were not more than half occupied.

The Trustees here express their appreciation and gratitude to all of the staff and employees; they have carried on the work of the hospital with enthusiasm and efficiency to the great good of the sick poor of Suffolk County.

CHARLES P. CURTIS,
President.

DECEMBER 31, 1935.

Gifts to the Peter Bent Brigham Hospital

AND

Social Service Department

FOR CURRENT EXPENSES THROUGH THE EMERGENCY
CAMPAIGN OF 1935

Miss Pamela S. Adams....\$	5.00	Mrs. Horatio J. Brown...	25.00
Miss Josephine E. Allen....	3.00	Mr. and Mrs. Alex S.	
David Ames	25.00	Browne	50.00
John S. Ames.....	10.00	Miss Luella C. Butler.....	2.50
Mrs. Oliver Ames.....	15.00	Mrs. H. G. Byng.....	10.00
Mr. and Mrs. Francis I.		Mrs. Henry B. Cabot.....	200.00
Amory	15.00	Mrs. Mary H. Callan.....	50.00
Mr. and Mrs. William		Mr. and Mrs. N. Stuart	
Amory	10.00	Campbell	150.00
Miss Caroline Anderson....	20.00	Miss Julia Carpenter.....	5.00
Anonymous	3,111.50	John Carter & Co., Inc....	15.00
Mr. and Mrs. Chas. F. Ayer	100.00	Mr. and Mrs. H. Daland	
Harry L. Bailey.....	25.00	Chandler	5.00
Mrs. C. H. Baldwin.....	5.00	Miss Alice Cheever.....	5.00
Mr. and Mrs. W. A. Bar-		Dr. and Mrs. David Cheever	100.00
ron, Jr.	10.00	Miss Helen Cheever.....	5.00
Mr. Henry F. Barry.....	10.00	Dr. and Mrs. Henry A.	
Dr. and Mrs. John W. Bar-		Christian	25.00
tol	5.00	Mr. Henry C. Clark.....	20.00
Miss Edith I. Basset.....	2.00	Miss Julia Cluck.....	5.00
Mr. and Mrs. J. Colby Bas-		Mr. William H. Coburn...	10.00
sett	10.00	Mr. and Mrs. F. D. Coch-	
Batchelder & Snyder Co.,		rane	50.00
Inc., and Employees...	50.00	Comm. of Mass. Employees	56.00
Mrs. Gregory P. Baxter..	15.00	Miss Ada L. Comstock....	15.00
Miss Ida G. Beal.....	5.00	Mr. and Mrs. A. B. Conant	5.00
Mr. Chas. S. Bird, Jr.....	5.00	Continental Baking Co. Em-	
Mrs. Francis W. Bird.....	15.00	ployees	1.00
Mr. Frank Blake.....	5.00	Mr. and Mrs. C. A. Cool-	
Mr. and Mrs. J. A. L. Blake	50.00	idge, Jr.	25.00
Mrs. Thomas S. Blumer..	10.00	Mr. W. J. Cornell.....	2.00
Boston Five Cent Savings		Mr. F. A. Countway.....	100.00
Bank Employees	5.00	Mr. W. A. Crosby.....	15.00
Miss Edith Richards Brad-		Mr. and Mrs. F. B. Crown-	
ley	12.00	inshield	10.00
R. M. Bradley & Co., Inc.,		Mr. and Mrs. Chas. P. Cur-	
and Employees	25.00	tis	250.00

PETER BENT BRIGHAM HOSPITAL

Miss Harriot S. Curtis....	25.00	General Dyestuffs Corpora-	
Mrs. John S. Curtis.....	50.00	tion	5.55
Mr. and Mrs. R. C. Curtis	250.00	Miss Mary Gibbons.....	2.00
Dr. and Mrs. Elliott C.		Gillette Safety Razor Co.	
Cutler	275.00	Employees	2.00
Mrs. L. B. Cutler.....	10.00	Gilmour Rothery & Co., Jor-	
Mr. Robert Cutler.....	175.00	dan Lovett & Co. and	
Mr. and Mrs. P. S. Dalton	10.00	Employees	5.00
R. L. Day & Co.....	10.00	Mrs. W. N. Goodnow.....	10.00
Mrs. Arthur B. Denny....	25.00	Mrs. Charles C. Goodwin..	5.00
Dr. Clifford L. Derick....	15.00	Mr. and Mrs. J. L. Grandin	15.00
Miss Rose L. Dexter.....	25.00	Judge and Mrs. Robert	
Mr. and Mrs. Malcolm Don-		Grant	10.00
ald	10.00	Mr. Roland Gray.....	10.00
Downes Lumber Co.....	5.00	Mrs. Edward W. Grew....	5.00
Miss Mary V. R. Draper..	2.00	Mrs. Alice M. Hall.....	5.00
Eaton Products Co. Em-		Mr. and Mrs. Damon E.	
ployees	8.75	Hall	15.00
Edison Electric Illuminat-		Dr. and Mrs. Francis C.	
ing Co. of Boston Em-		Hall	10.00
ployees	13.00	Mrs. Joseph A. Hall.....	25.00
Mrs. Edward S. Emery....	40.00	Mr. and Mrs. L. H. Hansel	5.00
The Employers' Group &		Mr. and Mrs. E. H. Harding	10.00
Employees	73.50	Harvard Club of Boston	
Mrs. John F. Enders.....	10.00	Employees	31.11
Mr. E. R. Eustis.....	10.00	Harvard Dental School Em-	
Mrs. H. E. Fales.....	20.00	ployees	20.00
Federal Reserve Bank Offi-		Mrs. George Hawley.....	25.00
cers and Employees....	5.00	Mrs. F. C. Henderson.....	25.00
Field and Cowles Employees	12.00	Mr. and Mrs. Charles Hig-	
Firemen's Fund Ins. Co.		ginson	20.00
Employees	7.50	Mr. and Mrs. E. J. Holmes	5.00
First National Bank of Bos-		Miss Laura P. Holmes....	10.00
ton & Affiliated Com-		Dr. and Mrs. John Homans	10.00
panies Employees.....	22.50	Miss Katharine A. Homans	15.00
Miss Margaret A. Fish....	5.00	Miss Marian J. Homans...	5.00
Miss Edith Fitz.....	20.00	Home Savings Bank Em-	
Dr. and Mrs. Reginald Fitz	25.00	ployees	5.00
Mrs. Otto Folin.....	40.00	H. P. Hood and Sons Co.	
Miss Ethel A. Forbes....	10.00	and Employees	25.00
Mrs. Benjamin W. Fred-		Hornblower and Weeks....	35.00
ericks	50.00	Hotel Statler Employees...	4.50
Mr. and Mrs. Donald Mc-		Mrs. Clement S. Houghton.	10.00
Kay Frost	100.00	Mr. Henry S. Howe.....	5.00
Hon. and Mrs. Alvan T.		Dr. Lyman H. Hoyt.....	10.00
Fuller	25.00	Mrs. Eliot Hubbard.....	10.00
Mr. Roy R. Gardner.....	10.00	Mr. and Mrs. Arnold W.	
Mr. and Mrs. Irvin McD.		Hunnewell	25.00
Garfield	25.00	Miss Louisa Hunnewell...	25.00
		Mrs. Ellerton James.....	5.00

GIFTS TO THE HOSPITAL

Miss Dorothy B. Jones.....	5.00	Dr. Francis C. Newton...	10.00
Jones McDuffee & Stratton Corp. and Employees..	10.00	Dr. Harlan F. Newton....	15.00
Mrs. Chas. H. Joy.....	15.00	Mrs. Henry Nickerson....	3.00
Mr. William E. Killilea....	28.00	Mr. James A. Noyes.....	30.00
Rev. Arthur L. Kinsolving	15.00	Miss Penelope E. Noyes...	75.00
Mr. John Knight.....	12.00	Miss Regina C. O'Connor..	4.00
Mrs. Amory A. Lawrence..	25.00	Dr. James P. O'Hare.....	10.00
Rt. Rev. William Lawrence	50.00	Miss Julia O'Leary.....	5.00
Mr. and Mrs. John C. Lee.	10.00	Mr. and Mrs. F. Ward Paine	75.00
Mrs. Lester Leland.....	10.00	Mr. and Mrs. R. C. Paine..	100.00
Dr. and Mrs. S. A. Levine..	50.00	Mrs. R. F. W. Paine.....	25.00
Liberty Mutual Ins. Co. Em- ployees	17.50	Mr. and Mrs. Roswell Par- ish	10.00
Miss Florence E. Loop.....	10.00	Miss Edith Parker.....	100.00
Miss Laurette Los.....	2.00	Mrs. R. H. Parker.....	50.00
Mrs. R. W. Lovett.....	25.00	Mr. and Mrs. Samuel C. Payson	5.00
Mrs. George H. Lyman....	10.00	Miss Amelia Peabody.....	15.00
Mr. Theodore Lyman.....	500.00	Mr. and Mrs. Francis Pea- body	200.00
Mrs. George A. Lyon.....	5.00	Mrs. W. Rodman Peabody.	10.00
Miss Rose M. Lyons.....	5.00	Peter Bent Brigham Hos- pital Employees	1,345.15
Dr. W. L. Macdonald.....	5.00	Mr. and Mrs. W. Y. Peters	25.00
Miss Christina MacIntyre..	2.00	Petroleum Heat & Power Co. Employees	5.00
Mr. Peter and Mrs. Mary MacKinnon	2.50	Hon. and Mrs. Williams Phillips	100.00
E. F. Mahady Co. and Em- ployees	15.00	S. S. Pierce Co.....	200.00
Mr. Henry R. Marden....	5.00	S. S. Pierce Co. Employees	5.00
Mass. Gas Co.—its Ind. Sub. and Affiliates Employees	5.00	Mr. and Mrs. J. B. Potter..	50.00
Mr. J. F. McElwain.....	50.00	Dr. T. B. Quigley.....	2.00
Mrs. R. B. Merriman.....	25.00	Mr. and Mrs. Neal Rantoul	25.00
Metropolitan Sales Corp. Employees	5.00	Miss Emily S. Reed.....	50.00
Mitchell Wing Co.....	5.00	Mr. F. W. Rhinelander...	3.33
Dr. Robert T. Monroe.....	10.00	Dr. H. F. Robertson.....	2.50
Moore & Summers.....	25.00	Mr. George G. Rose.....	5.00
Mr. Francis J. Moors.....	200.00	Mr. Charles F. Rowley....	10.00
Mrs. Everett Morss.....	20.00	Mrs. Francis W. Sargent...	800.00
Mr. Noel Morss.....	25.00	Dr. M. A. Schnitker.....	2.50
Miss Ethel Murkland.....	12.00	Dr. M. T. Schnitker.....	3.00
Dr. W. N. Myhre.....	1.00	Mr. O. J. Schoonmaker....	10.00
Nashua Mfg. Co. Employees	3.00	Mr. and Mrs. Ellery Sedg- wick	250.00
New England Conservatory of Music Employees...	2.00	Dr. and Mrs. G. C. Shattuck	20.00
New England Power Assoc. & Affiliated Companies Employees	15.00	Mrs. S. Parkman Shaw....	25.00
New England Tel. & Tel. Co. Employees	78.42	The Shepard Stores Em- ployees	1.00
		Miss Katherine H. Shiels...	20.00
		Mrs. William Simes.....	25.00

PETER BENT BRIGHAM HOSPITAL

Mrs. C. L. Slattery.....	3.00	Dr. and Mrs. C. F. Wal-	
Mr. and Mrs. George W.		cott	15.00
Smith	10.00	Dr. I. C. Walker.....	5.00
Socony-Vacuum Oil Co.,		Mr. Guy Waring.....	1.00
Inc., Employees	2.00	Mr. and Mrs. B. W. War-	
Mr. and Mrs. W. D. Sohler,		ren	10.00
Jr.	25.00	Mrs. G. E. Warren.....	25.00
Mr. and Mrs. Philip L.		Mr. and Mrs. Joseph War-	
Spalding	25.00	ren	50.00
Mrs. R. H. Stevenson.....	5.00	Miss Susie A. Watson....	10.00
Suffolk Savings Bank for		Mr. E. S. Webster, Jr.....	100.00
Seamen & Others, Em-		Mr. and Mrs. L. J. Webster	10.00
ployees	20.00	Mr. and Mrs. Wm. Whit-	
Mr. Edward W. Swan.....	10.00	man, Jr.	10.00
Miss Elizabeth D. Tallman	10.00	Miss Margaret Whitney....	25.00
Miss Mary DeW. Thacher	5.00	Miss Madeleine Wilkins...	2.00
U. S. Government Em-		Mrs. R. B. Williams.....	50.00
ployees	22.10	Mrs. Frederic Winthrop...	100.00
Mr. and Mrs. Chas. Walcott	35.00	Mr. and Mrs. O. G. Wood..	25.00
		Mr. Benjamin L. Young....	20.00

Free Bed Fund, 1935

Alexander Cochrane Free Bed	\$10,000.00
Walter Hunnewell Free Bed	10,000.00
Miss Aimee Lamb (In memory of Mrs. Winthrop	
Sargent)	5,000.00
Carrie M. Hall Free Bed	8,000.00
(Alumnae Association of the Peter Bent Brig-	
ham Hospital School of Nursing)	
Henry Saltonstall Howe Free Bed	5,000.00

FREE BEDS FOR THE CURRENT YEAR

Mr. Chas. P. Curtis	\$ 200.00
Miss Aimee Lamb	300.00
Mrs. F. S. Parker	100.00
A. C. Ratschesky Foundation	200.00

Gifts to the Hospital During the Year 1935

State St. Trust Company, Excr. u/will William G. Matthews, final payment of share of residue of the estate under fifth clause of said will	\$ 4,838.77
Mrs. Rose Pokat, gift in memory of Mr. Louis Pokat	5.00
Mrs. Anna K. Summerbell, gift in appreciation of care as a patient in O. D. Department	20.00
Mr. Jacob Tekulsky	10.00
Estate Samuel Hirschberg, First National Bank, Trustee	9.00
Mrs. Mary A. O'Leary	3.00
Mr. William Jardine	5.00
Mr. Charles P. Curtis, gift for a free bed for year 1935	100.00
Miss Aimee Lamb, gift for three annual free beds for year 1935..	300.00
New England Trust Company, Trustee under will of Photius Fiske for the benefit of poor and needy colored people	200.00
Old Colony Trust Co., Trustee u/deed Paul Wylde Jackson, additional gift to the "Henry Clay Jackson Fund," the in- come only to be used for the general purposes of the Hospital	20,000.00
Committee of the Permanent Charity Fund, Inc., for the general purpose of the Social Service Department	2,000.00
For relief cases	800.00
Proceeds of card party for the benefit of the Social Service De- partment	146.55
Proceeds of the concert, "May in Paris," for the benefit of the Social Service Department	1,841.15
Carrie M. Hall Fund:	
The Peter Bent Brigham Hospital School of Nursing Alumnae Association	\$ 800.00
Mr. Charles P. Curtis	200.00
	<hr/> 1,000.00
Doctor Monroe's Arthritic Fund:	
Miss Margaret Vickery	\$ 5.00
Miss Sarah K. Burgess	5.00
Mrs. James B. Draper	10.00
Miss Helen R. Williams	25.00
Miss Margery Crothers	180.00
	<hr/> 225.00
Fund for research in Renal and Vascular Diseases:	
Anonymous gift through Dr. J. P. O'Hare	\$ 1,000.00
Mr. D. W. Estabrook through Dr. J. P. O'Hare.	25.00
	<hr/> 1,025.00
Mr. G. Gorham Peters, gift to the G. Gorham Peters Fund for Traveling Fellowship through Dr. El- liott C. Cutler	1,000.00

PETER BENT BRIGHAM HOSPITAL

Elliott C. Cutler Fund:

Anonymous	\$ 2,500.00	
Dr. Elliott C. Cutler	200.00	
		2,700.00
Anonymous gift to the Superintendent's Special Fund.....		2,500.00
Emergency Campaign of 1934, final payment of quota for year 1934		3,337.49
Emergency Campaign of 1934, final payment of quota for year 1934 of the Boston Council of Social Agencies for relief of Overseer's cases		22.37
Emergency Campaign of 1935, on account of Campaign quota including Social Service Department		68,200.00
Emergency Campaign of 1935, to be charged against the 1935 Campaign quota of the Boston Council of Social Agencies for relief of Overseer's cases		819.50
Hospital Equipment:		
Mr. Charles P. Curtis, gift for purchase of three new sterilizers		330.00
Mr. Edward Mallinckrodt, Jr., gift for surgical equipment..		400.00

GIFTS TO THE SOCIAL SERVICE SPECIAL GIFT FUND

Mr. Raynor G. Wellington..\$ 10.00	Mrs. Laurence Brooks.....\$ 15.00
Mrs. Jennie F. Pipper..... 2.00	Mrs. George P. Denny..... 5.00
Mrs. Joseph Warren..... 15.00	Benton Fund 40.00
Town of Brookline ..... .75	King's Chapel Sunday
Industrial Aid Society 17.00	School 35.00
Family Welfare Society.... 43.13	American Invalid Aid So-
Lend-a-Hand Society 156.25	ciety 20.00
Miss Christine McLeod,	John Clark Fund..... 55.00
Trustee 7.80	Mr. David G. Baird..... 1.00
Frederick E. Weber, Char-	Mr. Henry A. Spellman,
ities Corporation 84.00	Trustee 2.20
We Ten 13.00	Disabled Veterans Christ-
Mrs. Wm. Lyman Under-	mas Remembrance
wood 10.00	Committee 5.00
Miss E. L. Morley..... 2.50	Mr. Jacques Rousser..... 15.00
Revere Ladies' Charitable	Mrs. A. Williams..... 3.00
Association 3.00	Miss Abigail A. Elliot..... 18.00
Cambridge Visiting Nurses'	Mrs. Harriet G. Smith..... 10.00
Association ..... .85	The Junior League, Boston. 10.00
Mrs. James R. Hooper..... 20.00	Bessie Brookman 2.00
Mary Whalen Special..... 30.00	Treferthen Fund 20.00
Mrs. Margaret Leland..... 15.00	Hebrew Ladies' Charitable
Jewish Family Welfare.... 3.88	Association 5.00
Dr. James I. Minot..... 5.00	Mrs. M. L. Weld 3.00
Mary A. Crabtree Fund... 75.00	Boston Provident Associa-
Mr. John Runkle..... 5.00	tion 20.00
Anonymous 198.20	Rotary Club, Boston, and
Mrs. Gertrude F. Hooper.. 10.00	friend 63.75

Report of the Treasurer

A STATEMENT of receipts of income from investments and of payments therefrom out of the office of the Treasurer for the year ending December 31, 1935, is as follows:

INCOME

Real Estate Receipts:

Rents	\$111,047.15	
Taxes paid by tenants	5,043.10	
Receipts from Portland Street power plant	853.87	
		<u>\$116,944.12</u>

Interest on Investments:

On bonds	\$ 46,260.06	
On mortgages	4,903.75	
	<u>\$ 51,163.81</u>	
Dividends	17,552.09	
		<u>68,715.90</u>

Total income	<u>\$185,660.02</u>
--------------------	---------------------

EXPENDITURES

Taxes	\$ 61,882.50	
Buildings, repairs, etc.	12,242.97	
Portland Street power plant	5,303.83	
Insurance	4,734.11	
Brokerage on leases	25.00	
Salaries	6,750.00	
Audit	700.00	
Safe deposit box rent	77.00	
Moody's investment service, one year	1,200.00	
Premium Treasurer's Fidelity Insur- ance bond	125.00	
Account books	5.50	
Bank collection charges	8.90	
Federal bank check tax .....	.84	
	<u>\$ 93,055.65</u>	
Bond premium amortized	65.84	
		<u>93,121.49</u>
<i>Amount carried forward</i>		<u>\$ 92,538.53</u>

PETER BENT BRIGHAM HOSPITAL

Amount brought forward.....	\$ 92,538.53
Transfer of income applicable to the following funds for year 1935:	
Harvey Cushing Fellowship Fund..\$ 1,678.67	
John P. Reynolds Scholarship Fund 125.00	
	<hr/> 1,803.67
Net investment income available for Hospital operating expenses	\$ 90,734.86
Net payments for Hospital operating expenses	\$229,372.79
Loss Superintendent's supplies	5,340.03
	<hr/> 234,712.82
Deficit of income for year 1935.....	\$143,977.96
Amount received from Emergency Campaign of 1935 applicable to Hospital expenses	<hr/> 66,707.00
Net deficit for year 1935 charged to General Fund	<hr/> <u>\$ 77,270.96</u>

BALANCE SHEET, DECEMBER 31, 1935

A S S E T S

Cash:	
In banks	\$ 46,479.01
Operating Expense Fund	20,000.00
	<hr/> \$ 66,479.01
Investments:	
Real estate	\$2,048,496.28
Mortgages	433,695.10
Bonds	852,894.31
Stocks	989,141.21
	<hr/> 4,324,226.90
Inventories	30,663.74
Accounts receivable (gifts in transit)	166.00
Hospital land, buildings and equip- ment	<hr/> 2,294,432.40
	<hr/> <u>\$6,715,968.05</u>

REPORT OF THE TREASURER

LIABILITIES

Accounts payable	\$ 34,113.67
Special Funds (see page 8)	
Permanent	\$ 151,581.73
Unexpended balances	15,388.95
	<hr/> 166,970.68
Reserves for depreciation	109,515.10
General Fund (see below)	6,405,368.60
	<hr/> <hr/> \$6,715,968.05

CHANGES IN GENERAL FUND

for the year ending December 31, 1935

Balance January 1, 1935.....	\$6,480,206.14
<i>Add:</i>	
Gifts credited to General Fund....\$	52.00
Final payment of legacy u/w Wm. G. Mathews	4,838.77
Final gift from Emergency Cam- paign of 1934 received April 26, 1935	3,359.86
	<hr/> 8,250.63
	<hr/> \$6,488,456.77
<i>Deduct:</i>	
Loss on sale of investments net....\$	5,817.21
Net Operating Deficit..\$143,977.96	
Less gift from Emer- gency Campaign..	66,707.00
	<hr/> 77,270.96
	<hr/> 83,088.17
Balance December 31, 1935	<hr/> <hr/> \$6,405,368.60

PETER BENT BRIGHAM HOSPITAL

SPECIAL FUNDS DECEMBER 31, 1935

PERMANENT

Alexander Cochrane Free Bed Fund	\$ 10,000.00
Walter Hunnewell Free Bed Fund	10,000.00
Carrie M. Hall Free Bed (Alumnæ Association of the Peter Bent Brigham Hospital School of Nursing)	8,000.00
Free Bed in memory of Henry Saltonstall Howe ...	5,000.00
Miss Aimee Lamb Free Bed Fund in memory of Mrs. Winthrop Sargent	5,000.00
Theodore Lyman Free Bed Fund	1,000.00
Surgical Dressing Fund—donation from the New England Surgical Dressing Committee	10,000.00
Farncis Weld Peabody Loan Fund	1,458.29
Harvey Cushing Fellowship Fund	33,573.44
John P. Reynolds Scholarship Fund	2,500.00
John P. Reynolds Medal Fund	1,000.00
Hemenway Squash Court	11,050.00
Radium Fund	3,000.00
Henry Clay Jackson Fund	50,000.00

\$151,581.73

Unexpended balances of donations and of income
from Permanent Funds for special purposes:

G. Gorham Peters Fund	\$ 2,500.00
Fund for Research in Renal and Vascular Diseases.	2,572.26
Diabetic Research Fund	5.56
Elliot C. Cutler Fund	3,287.60
Social Service Special Gifts Fund	61.04
Doctor Monroe's Arthritic Fund	67.40
Harvey Cushing Fellowship Fund, unexpended in- come	4,782.48
John P. Reynolds Scholarship Fund, unexpended income	201.85
Superintendent's Special Fund	1,910.76

\$ 15,388.95

EDMUND D. CODMAN,
Treasurer.

Report of the Superintendent

THIS is the twenty-second report of the Superintendent, covering the year 1935.

There were admitted to the wards 4,422 patients, as compared with 4,373 last year. The number of days' care was 68,108, a slight decrease over 1934. The average bed occupancy was 76+%. The average stay per patient was 15+ days, as compared with 16— last year. The percentage of pay, part pay, and free patients remained practically unchanged. The per capita cost, based on total expenditures in all departments (except the amount paid graduate nurses employed at the expense of patients for special duty) was \$7.10— as compared with \$7.15 in 1934. Deducting the cost of operating the private ward and the out-door department, the per capita cost was \$6.05+ as compared with \$6.06 last year. The daily per capita cost for provisions for all persons fed averaged \$.39+ as compared with \$.36— in 1934.

The total operating expenses for the year were \$512,983.57 and the total operating receipts were \$285,814.91. The difference, \$227,168.66, represents the amount of free work done during the year.

We are deeply indebted to the Emergency Campaign of 1935. We particularly thank the many volunteer officers who gave so generously of their time to make the Campaign a success, and we thank the public for its generous response. Without their assistance, it would have been impossible for us to carry on our work to anything like the extent we did and have done in previous years. We are proud to record the fact that no patient residing in Suffolk County was refused admission to the Hospital because of inability to pay.

In the Out-Door Department, the number of new patients treated was 7,461 as compared with 7,571 the previous year. The total number of visits was 77,728 as compared with 83,533 in 1934. The drop is partially accounted for by the fact that, in order to do the kind of work we want to do, a longer time is given for appointments. With the exception of the necessary time allowed for emergency cases, in practically all departments the time is filled from 10 to 14 days in advance. Then again, owing to the depression, outside physicians continue to treat for small fees patients whom in good times they would refer to out-patient clinics. Six hundred and fifty-five patients were rejected. Of this number, 382 because all appointment times were filled; 174 because applying for treatment for which we had no suitable clinics, such as eye, ear, dermatological, etc.; 29 because they refused to get a reference letter from their local doctor; 24 would not wait for an appointment; 32 were too late for appointments which they had already made; 14 were financially ineligible. The average cost per out-patient visit was \$.58— as compared with \$.57+ last year. More complete detail will be found by reference to Table II, Comparative Statistics, and Table IV, which gives a complete analysis of expense and revenue.

An attempt has been made to still further curtail the cost of operating the hospital, and with this in view, it was decided to omit in the medical records the typing of laboratory and treatment sheets including special laboratory notes, to omit summaries of previous admissions, and have briefer notes. In the surgical records, it was decided to omit summaries of previous admissions, to have briefer notes and discharge summaries. These changes were put into effect just before the beginning of the year.

REPORT OF THE SUPERINTENDENT

On February 15, 1935, a Formulary was instituted with definite restrictions of the numbers and character of drugs which could be dispensed. This has permitted a saving of several thousand dollars.

On April 1, 1935, a cafeteria was opened for the staff and nurses which enabled us to dispense with twelve employees. The whole plan of the serving room was altered; a partition was erected to separate the serving section from the noise of the dish-washing section. Because of the location of the dining rooms, it was necessary to install two steam tables. The plan has worked satisfactorily. Cafeteria service is now used for all meals—breakfast, luncheon and dinner. It is hoped that when conditions improve, we may continue its use for breakfast and luncheon, but have waitress service for dinners.

On July 1, Miss Helen Goodwin resigned as Executive Assistant to become Superintendent of the Rumford Community Hospital, Rumford, Me., after eight years' service. With her extended administrative training, Miss Goodwin should be an excellent administrator for the hospital, and she carries our best wishes for her success. She was succeeded by Mrs. Eva McComb Thomas, a graduate of the School of Nursing of Peter Bent Brigham Hospital, who had previously served as chief clerk in the appointment office of the Out-Door Department. In the Dietary Department, Miss Ann Schultz resigned in June, 1935, as assistant administrative dietitian to accept a position as dietitian of the Providence Plantations Club. In December, Miss Margaret Elder, who had been on our staff for three years, accepted the position of dietitian at the Mary Hitchcock Memorial Hospital, Hanover, N. H. Miss Evelyn Nichols, a graduate of Framingham State Teachers' College, and a former student dietitian here, succeeded Miss Schulz. Miss Margaret O'Neill from Iowa State University and Mi-

PETER BENT BRIGHAM HOSPITAL

chael Reese Hospital took over Miss Elder's duties. The course for student dietitians has been increased from nine to ten months, which now includes a month's affiliation with the Heywood Memorial Hospital in Gardner, Mass., for experience in small hospital food administration, and three weeks at the Massachusetts General Hospital for commercial cafeteria work. The total special diet days for the year 1935 were 12,139 in comparison with 11,971 last year. The outstanding diets were: Diabetic, 2,375; High Vitamin, 1,804; High Caloric, 1,202; and Obesity, 1,079.

On May 23, 1935, in the Staff Room of the Hospital, Mr. Charles P. Curtis, President of the Massachusetts Humane Society, presented their gold medal to Drs. George R. Minot and William P. Murphy in recognition of the work they have done in advancing the knowledge and treatment of anemias.

We wish to record a generous gift from Mr. Charles P. Curtis, President of the Corporation, towards the purchase of utensil sterilizers for the ward utility rooms; also a gift of \$2,500 from Mr. William Amory to be used for providing equipment or for other special needs which we would not be able to provide from the operating funds.

We again take pleasure in expressing our thanks to St. Paul's Industrial Society for the very considerable amount of help they have contributed in making various articles of clothing.

The Gray Lady Service of the American Red Cross has continued to have charge of our patients' library and have given devoted and efficient service. During the year, 3,972 books were circulated from the library shelves; 1,405 magazines; 19 puzzles; 322 outside books, and 117 foreign books; in all nearly 6,000 pieces of reading matter. One hundred and seventy-eight books

REPORT OF THE SUPERINTENDENT

were given to the hospital, 52 from the Red Cross, 36 from Mr. William Amory; 16 from Mr. Charles P. Curtis; 16 from Dr. James P. O'Hare; 7 from Miss Edith Bassett, and 7 from Mr. Thomas Mullen. Magazines were generously given by many members of the staff and outside friends. Mr. Curtis presented a new edition of the Encyclopedia Britannica in a handsome bookcase to the Nurses' Reference Library.

It is a pleasure to record the splendid spirit of co-operation throughout all departments of the Hospital. There is nothing which contributes more to the pleasure of the day's work. I wish to again thank the members of the Corporation for their support.

JOSEPH B. HOWLAND,
Superintendent.

DECEMBER 31, 1935.

PETER BENT BRIGHAM HOSPITAL

Table I

(This table is being omitted this year)

Table II

Comparative Tables of Statistics

HOSPITAL WARDS AND SINGLE ROOMS

Patients in hospital first of year:

	1935	1934
Medical	83	77
Surgical	100	91
Total	183	168

Patients admitted during the year:

Medical	1,956	1,809
Surgical	2,466	2,564
Total	4,422	4,373

Patients treated in hospital wards and private rooms during the year:

Medical	2,039	1,886
Surgical	2,566	2,655
Total	4,605	4,541

Patients discharged during the year:

Well	11	18
Improved	3,557	3,486
Unimproved	421	334
Untreated	178	226
Died	282	294
Total	4,449	4,358

REPORT OF THE SUPERINTENDENT

Patients in hospital end of year:

	1935	1934
Medical	73	83
Surgical	83	100
Total	156	183

Total patients days' treatment:

Paying patients	27,032	27,099
Part-paying patients	22,278	22,766
Free patients	18,798	19,507
Total	68,108	69,372

Percentage:

Paying patients	40—	39+
Part-paying patients	33—	33—
Free patients	27+	28+
Total	100	100

Average patients per day:

Paying patients	74+	74+
Part-paying patients	61+	62+
Free patients	52—	53+
Total	187—	190+

Medical	85—	82+
Surgical	102—	108+

Total	187—	190+
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Average time per patient in hospital	15+days	16—days
Daily average cost per patient.....	\$7.10—	\$7.15+
Daily cost per capita for provisions for all persons supported .....	.39+	.36—

Patients were admitted as follows:

Paying regular rate	1,950	1,799
Paying less than regular rate ...	1,276	1,246
Free	1,196	1,328
Total	4,422	4,373

PETER BENT BRIGHAM HOSPITAL

OUT-DOOR DEPARTMENT

	1935	1934
Number of cases treated	7,461	7,571
Medical	3,036	2,787
Surgical	4,256	4,591
Urological	169	193
Number of visits	77,728	83,533
Medical	39,850	42,014
Surgical	32,372	35,437
Urological	5,506	6,082
Cost of maintenance of Out-Door Department	\$44,743.52	\$47,748.57
Daily average cost per patient .....	.58—	.57+

AMBULANCE

Ambulance calls during the year.....	560	495
Average calls per day	2—	1+
Mileage for patients	4,177	3,908
Other business	1,975	1,664
Total mileage	6,152	5,572

REPORT OF THE SUPERINTENDENT

Table III

Year	Expenses	Receipts	Number of patients admitted to wards	Total days' treatment	Average stay in hospital	Average cost per day per patient	Daily cost per capita for provisions per day	OUT-DOOR DEPARTMENT			
								Cost of maintenance	New cases treated	Visits	Average cost per visit
1913	\$190,510.41	\$36,571.58	1,370	25,157	20—days	\$7.02—	\$0.53—	\$10,081.39	8,347	30,434	\$0.33+
1914	256,423.25	69,251.23	2,843	49,295	17+days	5.15+	.35—	12,108.39	8,536	36,523	.33+
1915	269,913.46	88,651.55	3,417	60,242	18—days	4.48—	.33+	16,551.07	9,810	47,687	.35—
1916	308,413.81	116,519.00	3,712	65,291	18—days	4.72—	.35—	19,140.56	10,995	53,405	.36—
1917	324,777.80	138,512.48	3,674	65,129	18—days	4.93+	.40—	18,989.10	7,952	45,153	.43—
1918	321,547.28	154,026.47	4,025	66,669	17—days	4.81—	.44—	20,557.07	7,631	49,972	.41+
1919	377,253.15	193,741.63	4,282	65,546	15+days	5.76—	.51—	25,033.43	7,862	49,572	.50+
1920	453,853.94	262,413.29	4,316	69,541	16+days	6.53—	.59—	25,694.39	7,707	52,116	.49+
1921	483,921.52	301,918.05	4,315	68,556	16—days	7.06—	.47—	28,157.67	8,111	58,014	.49—
1922	492,676.00	325,667.28	4,685	70,695	15+days	6.97—	.45+	29,510.51	8,801	57,967	.51—
1923	540,524.41	367,369.45	4,775	74,854	16—days	*6.64—	.47—	32,218.89	8,846	59,336	.54+
1924	535,531.70	354,083.78	4,658	72,539	16—days	*6.83—	.46+	33,753.42	7,081	60,291	.56+
1925	557,252.24	365,749.62	4,422	72,411	16+days	*7.12—	.48+	36,188.43	6,192	55,632	.65+
1926	578,207.16	389,781.57	4,402	75,742	17+days	*6.97—	.48—	35,696.05	7,699	60,671	.59—
1927	620,177.85	412,568.64	4,607	78,645	17+days	*7.05+	.48+	42,276.58	8,164	57,162	.74—
1928	636,392.29	431,017.71	4,523	77,691	17+days	*7.25—	.48—	48,802.11	7,849	75,593	.66+
1929	663,064.84	456,916.54	4,472	78,743	18—days	*7.41—	.49—	53,963.24	7,784	76,523	.71—
1930	676,080.08	447,258.14	4,121	77,852	18—days	*7.68—	.49—	51,456.67	7,595	71,188	.72+
1931	652,391.94	418,586.38	4,056	72,256	18—days	*8.00+	.43+	47,962.10	8,173	78,786	.61—
1932	554,140.48	331,787.15	4,220	68,301	16+days	*7.49+	.36+	46,715.77	7,976	80,272	.57—
1933	512,849.91	257,739.65	4,272	64,642	15+days	*7.60—	.32+	47,748.57	7,571	83,533	.57+
1934	527,423.88	294,231.34	4,373	69,372	16—days	*7.15+	.36—	44,743.52	7,461	77,728	.58—
1935	515,187.70	285,814.91	4,422	68,108	15+days	*7.10—	.39+				

* 1923, 1924, 1925, 1926, 1927, 1928, 1929, 1930, 1931, 1932, 1933, 1934 and 1935 do not include the cost of special nurses.

PETER BENT BRIGHAM HOSPITAL

Table IV
Expense and Revenue Statement

ADMINISTRATION EXPENSES

	1935	1934
Salaries, officers and clerks	\$31,834.63	\$32,470.41
Office expenses	215.63	57.50
Stationery, printing and postage	4,175.51	4,801.64
Telephone and telegraph..	8,705.55	8,853.86
Liability insurance	402.92	1,363.40
Miscellaneous	1,732.49	811.86
Total administration expenses	\$ 47,066.73	\$ 48,358.67

PROFESSIONAL CARE OF PATIENTS

Salaries and Wages:		
Physicians and surgeons	\$22,665.92	\$21,887.09
Sup't of nurses and assistants	8,638.85	8,680.93
Nurses	19,992.66	22,882.41
Special nurses	29,562.50	31,083.00
Orderlies	8,109.26	8,029.29
Druggists	5,270.40	6,471.51
Ward employees	8,873.14	9,382.56
Clerks	12,109.92	14,714.59
Instrument repairs	772.20	801.20
	\$115,994.85	\$123,932.58
Training School:		
Salaries	\$ 4,285.06	\$ 4,375.35
Supplies	1,791.18	2,236.60
	6,076.24	6,611.95
Medical and Surgical Supplies:		
Apparatus and instruments	\$ 1,550.99	\$ 1,355.42
Medical and surgical supplies	20,709.58	26,614.20
Alcohol, liquors and wines	862.59	1,267.37
	23,123.16	29,236.99
Amounts carried forward	\$145,194.25	\$159,781.52

REPORT OF THE SUPERINTENDENT

	1935	1934
<i>Amounts brought forward</i>	\$145,194.25	\$159,781.52
Out-Door Department:		
Wages	\$19,406.57	\$19,130.77
Supplies	11,675.89	15,048.19
	<u>31,082.46</u>	<u>34,178.96</u>
X-ray Service and Photography:		
Salaries and wages.....	\$21,767.43	\$22,000.78
Supplies	9,958.01	11,014.53
	<u>31,725.44</u>	<u>33,015.31</u>
Library	800.00	800.00
Total professional care of patients' expenses	\$208,802.15	\$227,775.79

DEPARTMENT EXPENSES

Ambulance:		
Labor	\$ 2,143.38	\$ 2,156.80
Supplies	2,658.03	1,056.95
	<u>\$ 4,801.41</u>	<u>\$ 3,213.75</u>
Laboratories:		
Labor	\$14,461.91	\$14,782.55
Supplies	6,495.31	6,491.80
	<u>20,957.22</u>	<u>21,274.35</u>
Housekeeping:		
Labor	\$27,558.13	\$31,077.52
Supplies	9,665.53	8,812.70
	<u>37,223.66</u>	<u>39,890.22</u>
Kitchen:		
Labor	\$14,766.41	\$14,696.65
Supplies	1,500.32	1,066.84
	<u>16,266.73</u>	<u>15,763.49</u>
Laundry:		
Labor	\$ 9,188.87	\$ 9,545.58
Supplies	1,426.81	1,615.97
	<u>10,615.68</u>	<u>11,161.55</u>
Steward's Department:		
Labor	\$ 3,684.38	\$ 4,136.37
Provisions:		
Bread	2,666.54	2,625.68
Milk and cream	13,278.88	13,644.12
Groceries	13,339.97	10,944.52
Butter and eggs	11,868.85	10,203.25
Fruit and vegetables..	9,563.94	10,053.27
Meat, poultry and fish	24,352.28	19,839.96
	<u>78,754.94</u>	<u>71,447.17</u>
Total department expenses	\$168,619.64	\$162,750.53

PETER BENT BRIGHAM HOSPITAL

GENERAL HOUSE AND PROPERTY EXPENSES

	1935	1934
Electric department	\$ 4,604.22	\$ 4,116.92
Heat, light and power.....	58,657.06	56,986.61
Fuel	13.00	.....
Gas	3,180.74	3,097.24
Insurance	2,185.17	115.42
Water	4,810.68	4,649.54
Maintenance, real estate and buildings	11,841.83	11,570.49
Maintenance, machinery and tools	47.85	1,783.05
Plumbing and steam fitting	5,358.63	6,219.62
<hr/>		
Total general house and property ex- penses	\$ 90,699.18	\$ 88,538.89

EXPENSES FROM SPECIAL FUNDS

Christmas Fund		\$ 75.00
Fiction Library Fund.....	\$ 11.45	88.55
Special Permanent Charity Fund	821.75	715.79
Social Service Fund.....	3,480.70	4,110.49
Social Service Special Gift Fund	1,059.98	1,426.59
Renal and Vascular Dis- ease Fund	1,019.39	839.08
Surgeon-in-Chief Fund....	1,400.00	1,200.00
Amory Fund	1,412.40	.....
Permanent Charity Fund..	2,000.00	2,000.00
Diabetic Research Fund...	11.85	21.08
Gray Fund	16.23	5,248.35
United Unemployment Fund	1,021.40	672.00
Arthritic Fund	157.60	.....
Reynolds Scholarship Fund	125.00	125.00
Superintendent's Special Fund	589.24	.....
<hr/>		
Total expenses from Special Funds	\$ 13,126.99	\$ 16,521.93

REPORT OF THE SUPERINTENDENT

CAPITAL EXPENSES

	1935	1934
Additional equipment	\$ 1,241.58	.....
Out-Door Department alterations .....	.....	\$ 424.60
Ford truck	655.00	.....
Kitchen equipment sold....	50.00*	.....
G. M. C. ambulance transferred to operating expense	1,860.00*	.....
<hr/>		
Total capital expenditures	\$ 13.42*	\$ 424.60

SUMMARY

EXPENSES

	1935	1934
Total administration expenses	\$ 47,066.73	\$ 48,358.67
Total professional care of patients' expenses.....	208,802.15	227,775.79
Total department expenses	168,619.64	162,750.53
Total general house and property expenses.....	90,699.18	88,538.89
<hr/>		
Total Hospital expenses	\$515,187.70	\$527,423.88
Capital expenditures	13.42*	424.60
<hr/>		
	\$515,174.28	\$527,848.48

SPECIAL FUNDS:

Christmas Fund	75.00
Fiction Library Fund	11.45
Special Permanent Charity Fund	821.75
Social Service Fund	3,480.70
Social Service Special Gift Fund	1,059.98
Renal and Vascular Disease Fund.....	1,019.39
Surgeon-in-Chief Fund	1,400.00
Amory Fund	1,412.40
Permanent Charity Fund	2,000.00
Diabetic Research Fund	11.85
Gray Fund	16.23
United Unemployment Fund	1,021.40
Arthritic Fund	157.60
Reynolds Scholarship Fund	125.00
Superintendent's Special Fund	589.24
<hr/>	
Grand total	\$528,301.27

\$544,370.41

* Deficit.

PETER BENT BRIGHAM HOSPITAL

REVENUE

	1935	1934
Administration receipts....	\$ 1,888.18	\$ 1,354.50
Professional care of patients:		
Board of private room patients	\$66,214.23	\$66,545.46
Board of ward pay patients	79,448.36	82,672.55
Special nurses	32,680.50	35,047.60
Out-Door Department ..	41,184.08	45,901.61
Photography and X-ray	38,389.78	35,798.56
Miscellaneous	24,106.48	25,323.49
	<hr/> 282,023.43	<hr/> 291,289.27
Department Receipts:		
Ambulance	1,903.30	1,587.57
	<hr/>	<hr/>
Total Hospital receipts	\$285,814.91	\$294,231.34
Cash from Treasurer:		
Current expenses	\$229,372.79	\$233,192.54
Arthritic Fund	157.60	.....
Amory Fund	1,412.40	.....
Reynolds Scholarship Fund	125.00	125.00
Social Service Fund....	3,480.70	2,253.66
United Unemployment Fund	1,021.40	672.00
Social Service Special Gift Fund	1,059.98	1,426.59
Diabetic Research Fund.	11.85	21.08
Gray Fund	16.23	5,248.35
Renal and Vascular Disease Fund	1,019.39	839.08
Fiction Library Fund...	11.45	88.55
Surgeon-in-Chief Fund..	1,400.00	1,200.00
Permanent Charity Fund	2,000.00	2,000.00
Special Permanent Charity Fund	821.75	700.00
Christmas Fund .....	.....	75.00
Superintendent's Special Fund	589.24	.....
Additional Equipment...	13.42*	424.60
	<hr/> 242,486.76	<hr/> 248,266.45
Grand total	\$528,301.27	\$542,497.79

* Deficit.

REPORT OF THE SUPERINTENDENT

Statement of Stock on Hand

	1935	1934
Administration supplies	\$ 3,780.48	\$ 4,440.76
Professional care of patients' supplies	15,265.21	16,862.93
Department supplies	10,745.52	13,601.80
General house and property supplies....	872.53	1,098.28
	<hr/>	<hr/>
	\$30,663.74	\$36,003.77

Report of the Roentgenologist

AN ANNUAL report is by custom a summary of a year's work, a year's achievements as well as the profit and loss of that period. But, also by custom, the Brigham annual report is more than that, it is a friendly letter to the graduates (and friends) of our institution, telling of the *modus operandi* as well as of the result; of the attempts and even of the failures as well as the accomplishments; of the trend of things, of the tendencies this way or that way, of the changes that are being made or being considered. In this informality of manner as well as of subject it is unique among hospital reports and I hope it may so continue to bridge the gap of knowledge between our delightful quinquennial reunions. There are occasional comments as to the value or pleasure a distant graduate has received from these reports, but most of us I am sure read them and digest them without written comment to the writer of the particular part or parts one approves of or disagrees with. The Roentgenologist, for one, would appreciate more comments, criticisms or suggestions for he does not have the gifted pen of a Cushing to beguile his readers, but must sweat and labor to achieve his modest offering for the altar of esprit. But the watchword is still economy and the official word has gone out to make the reports short and snappy, so let's get on with it.

One of the most important developments in this department the past year has been the decision to institute a three-year period of training for the house officers in roentgenology, instead of the present two-year term. This is in line with the recommendations of the Advisory Board for the Medical Specialties acting in conjunction with the Council on Medical Education and Hospitals of

the American Medical Association. The object is to give the individual a more thorough and comprehensive training, not only in the specialty itself but also in the branches of medicine or science allied to the specialty. The recommendations are that applicants must be graduates of Class A medical schools, that they must have had at least one year's internship (preferably two years) in an approved hospital before entering the specialty, and that they must get a thorough training in the basic sciences with the work in the specialty. After completing such a three-year course in an approved hospital or institution, and after an additional two years of work in hospital or private practice of the specialty the candidate is eligible to take the examinations of the board of that specialty for certification as a qualified specialist, with the approval of the American Medical Association backing up the authority of the board. This is definitely not a step to control any specialty or to develop a medical guild or closed shop, but it is a broad move to improve the quality and augment the training of the men entering the specialty and by formal and public approval of men certified by the boards to protect the public from incompetent and unqualified men.

Our plan therefore is to take only one man a year, as before, but to keep him on for three years instead of two. He will be given special work in anatomy, pathology (particularly oncology) and physics during his first year, will have the concentrated clinical work in his second year as at present, and will assume some of the responsibility as well as help with the teaching during his third year. He will be required to write a thesis or an original article on clinical material during his second or third year, and it is quite possible that it can be arranged to give the candidate a special degree from Harvard Medical School, provided he fulfills all require-

ments and successfully passes an adequate examination.

The advantages of this longer course of training are obvious—a more thorough and more complete training for the applicant, with an additional year of experience under proper guidance. For the Hospital a more adequate service is obtained from the department of radiology. For the future of radiology a better trained group of young men is sent forth to become our colleagues and successors.

The disadvantages are the longer time required and the stricter preliminary period, both postponing the time when a candidate may hope to become self-supporting. Lest this long period of financial sterility may deter good but financially unendowed young men from applying for the service, we have recommended a small salary beginning with the first year of service and increasing to the usual resident's stipend the third year. This has not been accomplished as yet, but with improved financial returns from this department it is probable that this will be granted in the near future. In the meantime we are trying to raise an endowment fund for the department, the income from the fund to pay the above salaries until such time as the general Hospital budget can shoulder the responsibility. The income from such a fund would be doubly welcome for research purposes, for the purchase and care of animals, for non-clinical equipment and materials, and for out-of-the-ordinary expenses or experimental matters. The sum of \$50,000 has been set as the present goal, and all of our graduates are hereby invited to contribute to this permanent fund. It will be invested properly and only the income will be used by the director of the department as outlined above.

While on financial matters it is very pleasing to report that the department is again "out of the red." Not any great amount, to be sure, but enough to more than pay

REPORT OF THE ROENTGENOLOGIST

for a new bedside machine which is shock-proof, thereby removing one serious responsibility and diminishing the technical dangers of our work. Never will we forget the time when one of the senior surgeons was knocked flat by a shock from the old apparatus while an X-ray was being taken during an operation. Fortunately he was not harmed and was even brave enough to request another and similar X-ray examination during an operation a few days later. The companion memory-picture of the house officer who had knocked him down a few days before is also permanently engraved somewhere in my cortex. I can see him yet, pale and mutely protesting, crossing himself devoutly as he plugged the switch of the spluttering old machine into the wall socket!

A third item of interest to be reported is the increase in the amount of therapy being done in the department. Up to two years ago 90% of our work was diagnostic. Since then the therapy work has increased considerably and this year it has amounted to slightly over 20%, as recorded by patients handled per day. It gives every prospect of going still higher the coming year. The apparent reasons are threefold: first the adoption of a newer technique with which the patients are given more treatment in a given series, spread over a longer period of time, frequently daily, and going as high as forty daily treatments in one series. By this method a much larger dose may be delivered to a given tumor without making the patient sick and without permanent damage to the skin, and with considerable improvement in the clinical results. The second reason is that improvement in results has encouraged the clinicians to refer more patients to us for this form of therapy. The third reason is a changing attitude of the physicians and surgeons on the staff with more encouragement to try X-ray therapy, not only in hopeless cases of malignancy

but also in earlier cases, in benign lesions and in several of the infections where it has proved to be of value.

As an index of the increasing interest in X-ray therapy it is noted that in the past twelve years there were only two out of some thirty papers we published which dealt with X-ray therapy. At present three papers are being prepared all dealing largely with therapeutic radiation in different fields. This shift in emphasis is certainly in part at least due to the interest in radiotherapy demonstrated by the assistant resident in the department, Doctor Vaughan. With the new system of three years of training it is planned to have the senior concentrate at least six months of his third year in the therapeutic work, with the opportunity to watch and study the work and the results with the new one-million-volt machine at the Huntington Hospital.

To complete this chapter it must again be stated that we are very badly in need of a new therapy machine, one which will be more efficient in time and in ease of adjustment, more accurate in dosage delivered, and one which is shock-proof, affording safety to the patient from the present danger of high-voltage discharge. Such a machine would simplify the work considerably, would save time and thereby allow a larger number of patients to be treated, and would undoubtedly give better results in our patients, from what we have already learned. Several attempts have been made to secure the necessary funds from outside sources, as yet unsuccessful, but we sincerely hope that the equipment can be obtained this coming year. It is indeed unfair to handicap the work any longer with the present obsolete machine. Indeed the whole department needs modernizing, as there are several units of equipment which have come into general use since the last overhauling in 1927. We need particularly a tilting table for fluoroscopic work, especially for the cases where the study of the spinal

REPORT OF THE ROENTGENOLOGIST

canal after injecting lipiodol is indicated. This would also be of considerable help with our routine gastrointestinal cases. A machine capable of making fast "spot films" during fluoroscopy would also be a welcome addition, as would a condenser machine for instantaneous radiographs of the chest and heart, but the real crying need is for a new therapy machine.

The fourth item of more personal appeal is that the bare walls of the X-ray office are gradually being covered (and adorned) by photographs of the former house officers in roentgenology with only a few still lacking. An attempt is also being made to complete a pictorial history of the department by means of photographs of the various roentgenologists who have served in times past. It is hoped that a complete record of all roentgenologists and roentgenological house officers can be obtained this coming year. If you are among the missing please do your duty and send in your photograph!

The fifth and final item is the invariable record of changes in personnel, for this department is in many aspects a training school as well as a clinical part of the Hospital and a pedagogic cubicle for the medical school, yes even in a way a small research center in its own right. The assistant resident for 1934-35, Dr. William W. Bryan, completed his two-year term June 30, and is happily ensconced in his native land of Atlanta, Ga., as roentgenologist to the Grady Hospital. He is also on the staff of the Emory Medical School with several other Brighamites. We hope that he has gotten warm again after two cold years in the "Far North." His place was filled by promoting Dr. Walter W. Vaughan who had served one year as house officer in the department. The position as House Officer was awarded to Dr. William N. Myhre, a graduate of St. Louis University Medical School, who had just completed a sixteen-months' service under Doctor Christian, an ideal preliminary training

PETER BENT BRIGHAM HOSPITAL

for a young roentgenologist. We regret to note two losses from the technical staff during the year. Miss Williams, who so ably cared for the patients in the X-ray and Alpine therapy, resigned after seven years in the department, and we all miss her very much indeed. Her place has been filled by Miss Gertrude Poskitt, a Brigham graduate in the class of 1924. Miss Hilda Riley, who has alternated between the X-ray department and Doctor Quinby's urological section, also resigned during the year and is now doing technical work in the X-ray department at the Central Maine General Hospital, Lewiston, Me. Miss Riley was the senior member of the technical staff, having been in and of the department for ten years. Her place has been filled by Miss Louise Taylor, also a Brigham graduate of 1928. We hope that there will be no further changes for a while although it is true that each one who leaves must of necessity leave somewhat of himself behind, and each new one who comes on brings a new thought and a new attitude, helping to keep the rest of us out of a rut. In closing may we hope that next year's report will start out with the news that the much-desired new therapy machine has finally been acquired!

MERRILL C. SOSMAN, M.D.,
Roentgenologist.

DECEMBER 31, 1935.

TABULATION OF DATA, FIVE-YEAR INTERVALS

YEAR	Ward	O. D. D. Cases	Private	All Others	Totals	X-ray Treatments	Films Taken	Dental Films	Alpine Lamp
1915	.....	.....	.....	...	4,572	....	8,719	....	....
1920	2,919	2,896	409	140	6,364	609	7,180	942	....
1925	3,948	3,479	1,163	228	8,818	809	18,366	2,905	1,487
1930	4,945	4,602	1,252	496	11,295	1,302	26,523	4,490	1,411
1935	4,393	4,967	1,286	712	11,358	2,358	18,059	6,416	372

Report of the School of Nursing

THE YEAR ends with the following staff of graduate and student nurses:

Superintendent of Nurses and Principal, School of Nursing	1
Assistant Superintendent of Nurses	1
Instructors	2
Supervisors	4
Night Supervisors	2
Graduate Head Nurses and Assistants in Departments	16
Graduate Nurse Anesthetists	2
Graduate Nurses—X-ray Department.....	3
Graduate Floor Duty Nurses	3
Masseuse	1
Student Nurses	129
	<hr/>
	164

Fifty-nine students were entered. Forty-two were graduated. Nineteen were dropped or withdrew.

Thirty-four students were entered from the School of Nursing at Children's Hospital for the usual six months' affiliation period.

The twenty-first annual graduation exercises were held November 14 in the Assembly Hall at Simmons College. Mr. Curtis, President of the Corporation, presided, and announced the graduates. The address was made by Rev. Samuel M. Lindsay, D.D., of Brookline, Mass. The Dr. John P. Reynolds gold medal for general efficiency was awarded to Katherine E. Herschleb, A.B. The John P. Reynolds scholarship for highest rank at the end of the second year was awarded to Ruth E. Pearson with an average of 92.4%.

This year, four students have been assigned here from Simmons College for field work in the courses in Ward Administration, three being graduate students and one an undergraduate from the Children's Hospital in the five-year course. We enjoy having these nurses on our wards. Their presence puts some additional burden on head nurses and supervisors for their teaching. We believe that this is rather stimulating, and we also find these students helpful in assisting the head nurses.

We are, at present, in the period of changing our relations with Simmons College from the old five-year program to the new. Eight students entered in September, the last group under the old plan. Last summer, the first class under the new five-year program had its summer course of six weeks in our classrooms. The College provided the instructors. This will be followed by a second summer course next year at the Massachusetts General Hospital, these two summer courses being designed to cover the subjects in the preliminary course which have not been previously taught to Simmons students before entering the School of Nursing, such as Nursing Arts, History of Nursing, etc. These students were assigned to the wards for practice for a limited number of hours a day. We found that they were quite useful, and their presence on the wards was stimulating to head nurses and to our own students. Next summer, we anticipate having the next freshman group for their first summer course, and next winter will bring a part of the first group back to us for full-time medical and surgical teaching and experience.

The basic three-year course has continued without change, other than an attempt to put some of the third-year lecture courses into the second year, on account of their interference in the third year with affiliations. We regret to report that the affiliation with the Massa-

REPORT OF THE SCHOOL OF NURSING

chusetts Eye and Ear Infirmary has been discontinued, on account of the economic pressure from within our own Hospital. The coming year will present some problems in alteration of our curriculum, in part to meet the five-year program, also to improve the three-year course, and as a result of the work of the Grading Committee which has been mentioned so many times in these reports. The logical next step following that Committee's report was a curriculum study by the National League of Nursing Education which is now being made. We shall hope to adjust our curriculum to meet some, at least, of its recommendations.

We record with pleasure the interest manifested of late by the Alumnæ Association in the undergraduate group. For the past two years, the Association has given a tea in the reception room of the Nurses' Home on the days of admission of classes. This has been in the nature of a welcome to the new students, and has afforded an opportunity for the parents who so frequently accompany them, to meet each other. The Alumnæ Association is now extending its interest and help to the students in extra-curricular activities. A tennis court and two pianos are the only means of recreation afforded in a school which averages 130 students. We are very much handicapped by lack of space for the introduction of any new activities. The Association and the students are showing considerable initiative in planning for the use of community resources. They are also discussing plans for amateur dramatics, weekly teas, etc.

The period of nurse training is a period of adjustment, not only to a profession but to adult life. I doubt if any other group of girls entering a vocation or a profession is required to orient themselves to as many different types of people and to as many strange and extraordinary and important situations as the nurse student.

PETER BENT BRIGHAM HOSPITAL

To be truly successful, girls are required with a great deal of intelligence, poise and tact. But the restrictions of hospital life and the close adherence to definite hours of study and of duty leave the nurse student little freedom, comparatively little time to live her own life or to make her own decisions. Some attention to extra-curricular activities should help her to keep normal and out of the inevitable rut in thought and habit into which nurses are so apt to fall.

Too many of those who enter "fall by the wayside," for physical, social, scholastic or financial reasons. We lose 33 to 40% of all who enter. Some means of testing candidates before admission to determine their aptitude for nursing work seems indicated.

CARRIE M. HALL,
*Superintendent of Nurses and
Principal, School of Nursing.*

DECEMBER 31, 1935.

Report of the Social Service Department

MEDICAL SOCIAL service problems have varied little from year to year. There are the tuberculous patients to place; many referred from the Medical Service were transferred to sanatoria, cancer patients who were unable to return home were sent to the State Hospital at Pondville, the Holy Ghost Hospital, Bickur Cholim Hospital and the Rose Hawthorne Lathrop Hospital as well as the two public hospitals at Long Island and Tewksbury.

For some of the patients nursing homes were used and where the family could not pay for the care, outside agencies were asked to help. For others, care was made possible by the aid of visiting nurses and frequently special funds were raised to finance home care.

It is difficult to get money for patients with chronic illness as people prefer to give money where the prognosis is more hopeful. Often these families need help desperately as the Overseers cannot meet the cost of adequate nursing home care or even the extra budget needed to care for a very sick person at home.

During the past year 723 new patients were referred to the Social Service Department; 264 reinstated; 532 brought forward from the previous year, making a total of 1,519 patients active in the Department. Medical reports sent other agencies during the year, 939; follow-up postal cards and letters, 4,671.

Medical Service

There were 159 new patients referred from the Medical Service, 40 patients brought forward from previous year and 52 patients reinstated.

The group of arthritic patients have many social problems largely due to their own physical condition and often the medical social worker can make a plan for

them that is reasonably satisfactory. A considerable amount of money has been raised to provide convalescent care in a cheerful spot like Chickering House. There are calls also for special apparatus and appliances which are definitely medical needs.

The main emphasis in the Arthritic Clinic is to prevent chronic invalidism and stabilize the patient on as high a level as possible. There were 73 new patients last year, 125 patients brought forward from previous year and 24 patients reinstated.

Work with the patients in the Luetic Clinic was divided fairly evenly between the three classes—the need of follow-up of other members of the family to see if they needed treatment, money needed to provide treatment and transportation of crippled patients. However, there is a large group of unemployed patients who need help to get their ordinary family living expenses. These patients are able to work but can find no work to do. Their support would be a community problem even if they did not have lues.

Out of this large clinic there are many with problems arising both from their medical condition and outside difficulties such as unemployment, marital instability and there are genuinely co-operative cases with the various social agencies where the casework responsibility is shared with a worker in the family or the children's agency. What most of the patients need is a frank acceptance of the disease as one needing long-time treatment but one that can be arrested and which is in most of its stages non-infectious. When the patients learn that improvement comes with treatment they are more willing to arrange for the examination of other members of the family.

The older cardiacs on the ward and other patients with chronic diseases are the group that offers various economic and medical problems that the community has

REPORT OF THE SOCIAL SERVICE DEPARTMENT

rather inadequate means to meet. Nursing homes are used for short periods as the regular convalescent homes do not take bed patients. The family agencies feel that this prolonged convalescent care is a medical need and are reluctant to take it on where the family is not already known to them. The result is that many of these patients go home too soon and break down or else they are held on the wards longer than is necessary, thus tying up beds that should be used for more acutely ill patients.

Hospitals for chronic cases are used as far as possible but there seems a real need for money for nursing home care or more beds available for chronic care.

LUETIC CLINIC—STATISTICS

1935

Patients brought forward from December 31, 1934	280
New Patients	109
Men — 59 Women — 50	
Reinstated Patients	14
Men — 11 Women — 3	
Total membership during 1935	403
Closed during year	85
Present membership December 31, 1935	318

Total number of patients during 1935	403
Men — 180 Women — 223	
Single	47
Married	121
Widowed	7
Divorced	5
White	125
Colored	46
Yellow	9
Single	51
Married	149
Widowed	14
Divorced	9
White	181
Colored	42

PETER BENT BRIGHAM HOSPITAL

Discharged	85
Transferred to other hospitals or L.M.D.	35
Discontinued Treatment	44
Letters returned unclaimed	26
Reported to Board of Health, not located	14
Lost	4
Probably cured	2
Died	4
Patients seen in clinic—not luetic	72

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Total number of letters sent	1,012
Special clinic letters	113
Board of Health letters	134
Special blood test letters	407
Treatment follow-up letters	310
Lumbar Puncture follow-up letters	48
Total number of visits during year	6,697
Men — 3,218	Women — 3,479

G. C. STATISTICS—1935

Patients brought forward from December 31, 1934.....	81
New Patients	58
Men — 38	Women — 20

Reinstated Patients	8
Men — 7	Women — 1

Total membership during 1935	147
Closed during the year	71
Present membership, December 31, 1935	76

REPORT OF THE SOCIAL SERVICE DEPARTMENT

Total number of patients during 1935 147

Men — 114 Women — 33

Single	79	Single	15
Married	31	Married	6
Widowed	3	Widowed	2
Divorced	1	Divorced	10
White	96	White	24
Colored	17	Colored	9
Yellow	1		

†

Discharged 71

Transferred to other hospitals or L.M.D. 16

Discontinued Treatment 47

Letters returned unclaimed 24

Reported to Board of Health, not located 8

Lost 15

Probably cured 8

Died 0

Total number of letters sent 312

Special G. C. letters 275

Board of Health letters 37

Total number of visits to Clinic during year 1,131

Men — 907 Women — 224

Cardiac Clinic—patients brought forward from previous year, 432; new patients, 142; 14 reinstated patients. Total cases active January 1, 1936, 410. Patients reporting at clinic yearly, 200 (not included in above statistics).

The clinic with its total of over 600 patients presents many problems; making appointments and equalizing the size of the bi-weekly clinics as well as arranging for transportation for some patients, school excuses for others, tests recommended by the doctors, are routine duties.

PETER BENT BRIGHAM HOSPITAL

A large part of the casework in this clinic is interpretative in helping the patient and relatives to understand that the patient should not live the sort of life that on one hand would be too strenuous and on the other hand make him too much of an invalid.

There were 969 visits to the Diabetic Clinic during the past year. Social Service has been active as heretofore, supplying insulin to patients unable to pay for their own. Student dietitians have been most helpful in making follow-up calls to instruct patients showing a considerable amount of sugar, or those who did not seem to understand the routine instructions given in the clinic. A clinic secretary has been in attendance in the clinic.

Surgical Service

There were 44 patients brought forward from previous year, 240 new patients; 33 reinstated patients. Total number during the year, 317.

The Follow-up Clinic has been held once a week to provide check-up examinations for patients operated in the Hospital. A clinic executive and a secretary are in charge and the social worker is available at any time to help with problems which may arise.

A clinic secretary has also been in attendance in the Dental Clinic during the year. Total visits to the clinic, 1,737; new patients during the year, 471; total number of patients, 541.

The service given by the Red Cross Motor Corps has been of inestimable value to us in the past year. Even more than formerly they have stood ready to transport patients to and from the Hospital who have been unable to travel on the street cars.

Members of the Junior League, Inc., of Boston have served as volunteer workers helping in several of the clinics.

REPORT OF THE SOCIAL SERVICE DEPARTMENT

Miss Barbara Hall resigned from the Department in October on account of illness. Mrs. Mary Lambert, graduate of Simmons College School of Social Work, was engaged to fill this vacancy.

The Ladies' Committee has held meetings once a month at the Hospital which the Staff of Workers attended giving reports of their activities.

The Waldorf Company, Inc., gave a very generous contribution through the gift of seventy-five tickets for Christmas dinners. The Y. M. C. U. has supplied us with car tickets for patients.

As in the past years a check for \$75 was given the Department from the Mary A. Crabtree Fund by the trustees of the Lotta M. Crabtree Fund at Christmas.

Two thousand eight hundred sixty-one dollars and seventy-one cents (\$2,861.71) was given to the Social Service Department during the year for relief; \$1,021.40 from the Emergency Relief Campaign, \$800.00 from the Committee of the Permanent Charity Fund, Inc., and \$1,040.31 from social service agencies and friends.

The money from the Unemployment Fund was used for patients aided by the City, the greater part for surgical appliances and to supplement aid. That from the Committee of the Permanent Charity Fund, Inc., was given for patients not aided by the Welfare. Money for the Special Gift Fund was raised for individual patients and families to supply convalescent care, nursing care, surgical appliances, financial aid, clothing and extra nourishment.

STAFF OF WORKERS

General Service

ALICE M. CHENEY, R.N.

General Medical Service—Arthritic Clinic

MARGERY L. CROTHERS

PETER BENT BRIGHAM HOSPITAL

Cardiac Service—General Medical

MRS. LOUISE S. LAWSON, A.B., M.S.

Surgical Service—Tumor Clinic

BARBARA B. HALL, A.B., M.S. (resigned Oct. 1, 1935)

MRS. MARY LAMBERT, B.S.

Lutetic Clinic

ADDIE M. COOLIDGE

MARGERY L. CROTHERS

Clerical Staff

ADDIE M. COOLIDGE

KATHLEEN O'TOOLE—and Follow-up Clinic

OLGA CAUHAPE—and Dental Clinic, two mornings a week

Volunteer Service

MISS ESTHER ATWILL

MISS EDITH ALLEN

MISS DOROTHY FRIEND

MISS ISABEL GARDINER

MISS GERTRUDE HOOPER

MRS. MARY McCARRON

MISS MARTHA PROCTOR

MISS ANNA REVERE

ALICE M. CHENEY, R.N.,

Director, Social Service Department.

DECEMBER 31, 1935.

Report of the Pathologist

THE FIGURES for the Department are as follows:

Autopsies, Medical Service	115
Autopsies, Surgical Service	67
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Total number of autopsies recorded	182
Reports on surgical specimens	1,632
Reports on bacteriological specimens	2,033
Guinea pig inoculations for suspected tubercu- losis	232
Ascheim-Zondek tests	76
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Total	3,973

The percentage of autopsies for the year, excluding cases taken over by the Medical Examiner, is 63—% for the entire Hospital; for the Medical Service 60+%, for the Surgical Service 67+%.

Changes in the staff in the last year were as follows:

Dr. Orville T. Bailey succeeded Dr. Robert E. Gross as Resident Pathologist, October 1, 1934.

Dr. Harold Johnson succeeded Dr. David I. Rutledge as House Officer, July 1, 1935, for a period of one year.

Dr. Darrell Ayer continues as a House Officer in Pathology.

Publications printed during 1935 are:

HASS, GEORGE M. Hepato-Adrenal Necrosis with Intranuclear Inclusion Bodies. Report of a Case. The American Journal of Pathology, Vol 11, pp. 127-142, 1935.

[DERICK, C. L.] and HASS, GEORGE M. Diffuse Arteritis of Syphilitic Origin. The American Journal of Pathology, Vol. 11, pp. 291-308, 1935.

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- [BRANCH, C. D.] and GROSS, R. E. Aberrant Pancreatic Tissue in Gastro-Intestinal Tract. Report of Twenty-four Cases. Archives of Surgery, Vol. 31, pp. 200-224, 1935.
- BAILEY, ORVILLE T. The Cutaneous Glomus and its Tumors—Glomangiomas. The American Journal of Pathology, Vol. 11, pp. 915-933, 1935.

S. BURT WOLBACH,
Pathologist.

DECEMBER 31, 1935.

Report of the Surgeon-in-Chief

IN SPITE of the fact that the depression has not entirely lifted, a spirit of optimism increasingly pervades the Brigham Hospital, and as a result the amount and caliber of the routine and productive work have been at a high level during the past year. Our financial situation is still a partially unsolved dilemma, though greatly assisted by larger gifts from the Community Federation of Boston, which this year has just finished a most successful drive for funds. It would appear that as the depression lifts the opportune time will shortly arise when we ourselves must direct our energies towards an active campaign for the building up of our capital investments as well as for necessary and vital replacements long held in abeyance because of lack of funds. It is important that we should at once squarely face this matter, for we shall only succeed in this vitally necessary undertaking when we put our own shoulders to the wheel.

This report gives me the opportunity to write publicly in our records, and thus in the history of the Hospital, of the deep debt of gratitude the staff of the Hospital owes to Mr. Charles P. Curtis, who now retires after twenty-one years of service as President of the Corporation. Hospitals differ in no essential way from other of the works of man and in turn their history and progress is wrapped up in individuals, for man, not materials, is the driving force that leads to progress. We would like Mr. Curtis to realize that his devoted services have been greatly appreciated and have been a special bulwark against discouragement in the difficult years just passed.

This report also gives me the opportunity to thank Mr. William Amory for another generous gift to the

PETER BENT BRIGHAM HOSPITAL

surgical department, which has enabled us (1) to purchase vitally necessary equipment for the prosecution of our daily tasks, (2) to extend our investigative activities, and (3) to have this year an extra Fellow in Neuro-surgery (Dr. Max Schnitker).

The general type and character of work in the Hospital remains about the same. I am convinced that the plan of having one of the senior surgeons conduct the teaching exercises as separate from routine responsibility for the care of the surgical patients has been a great step forward in our Medical School responsibility. I feel that we can well be proud of the way in which the Brigham Hospital has assumed its teaching obligations. Students in all the last three years of the medical school training now receive a part of their instruction in the Hospital, and all of these duties from the second-year section work through the clinical clerkship are carried out in a spirit that offers every opportunity to the student and makes him feel at home in the Hospital.

A happy growth in our life has been the increasing closeness of the relations between the departments of medicine and surgery. The clinics in the Out-Door Department relating to neurology, endocrinology, diseases of the thorax and of the gastro-intestinal system, which are served by members from both departments, permit an interchange of opinion that is producing a healthy reaction; and the tumor clinic, served by the X-ray and pathological departments as well as the surgical department, is another evidence of our tendency to bring to our patients more than a single opinion. It has always been true in the Brigham Hospital that the medical service, contrary to the custom so common elsewhere, has on the whole been most eager to urge the surgical department to employ their special form of therapy. This permits me to suggest at this time that

REPORT OF THE SURGEON-IN-CHIEF

we inaugurate the custom of the Physician-in-Chief and the Surgeon-in-Chief exchanging positions for a period of one or two weeks each year. Such a custom would not only knit together more closely people whose attitude of mind is made somewhat different by their daily tasks, but would permit staffs now sometimes separated by an intellectual wall a more free and easy means of communication. I can foresee that should the Brigham Hospital start this custom we might well perform an important rôle in establishing closer hospital life between groups which often seem to live in water-tight compartments.

I should like to report at this time that we are making progress in the contemplated union of the surgical internships of the Children's Hospital and the Peter Bent Brigham Hospital. We now lack, for the benefit of our house staff, training in the recognition and care of many of the embryological defects seen in children for which surgery is of benefit; and at the same time internes now obtaining their surgery largely at the Children's Hospital need some experience in the care of the common diseases of the adult, such as biliary diseases and tumors, which cannot be studied in a hospital restricting itself to the preadolescent period. A joint internship of possibly two and one-half years' duration should provide a more adequate training for the young surgeon than is commonly available and it is our hope that this joint internship can be worked out before the next interne examinations fall due.

There have been a few changes in the senior staff. Dr. Lyman Richards has been moved from a consulting position to the rank of Otolaryngologist to the Hospital. Through the generosity of Mr. Edward Malinckrodt, Jr., of St. Louis, a sum was provided which allowed us to have a modern otolaryngological treat-

ment and diagnostic table with its various equipment. This has been set up in the room in the Out-Door Department heretofore used only by the Dental Clinic, and one day a week Doctor Richards attends the Hospital and sees here all cases referred from the house or Out-Door Department both for diagnosis and therapy. This has added a considerable number of otolaryngological procedures which would seem to be of benefit for the training of our house staff. The clinic is purely a reference clinic and we make no attempt to take cases directly into the Hospital who desire nose, ear, and throat treatment.

We have also added to the staff as Junior Associate in Urology Dr. Fletcher Colby, previously on our staff from 1924 to 1927, in order that there might be some active and experienced person trained in urology available during the few occasions when Doctor Quinby is out of town. We have further added to the junior associate group Dr. Lee Kendall, previously an interne in this Hospital and later an assistant resident surgeon under Dr. George Heuer at the New York Hospital. Doctor Kendall has recently returned to take up the active practice of surgery in Framingham.

We have been blessed in the past year with an unusual number of men of high caliber in the ranks of fellows and assistant resident surgeons, and the history of their subsequent career is of interest. Doctor Robertson, leaving the post of assistant resident surgeon, has settled in Toronto. Dr. Max Schnitker is continuing with us for another year, as Neurological Fellow, under the stipend given by Mr. William Amory. Doctor Shambaugh became Harvey Cushing Fellow, and first spent some months in the laboratory here and is now on this fellowship in Europe. Doctor Branch, in July of 1935, succeeded to the post of Resident Surgeon. His training

REPORT OF THE SURGEON-IN-CHIEF

as interne in Cleveland and as assistant resident surgeon and Arthur Tracy Cabot Fellow here brings him to this most important task as well qualified as any of his predecessors. Doctor Alt, for two years Urological Fellow, left to take up active practice with Dr. Peer Johnson in Beverly. Doctor Walter has just come into the Hospital as Assistant Resident Surgeon after an unusually productive period, first as Harvey Cushing Fellow in our Hospital Laboratory and then as Arthur Tracy Cabot Fellow in the Medical School Laboratory. Meanwhile we have had two George Gorham Peters Fellows: first, Doctor Dupertuis, who spent most of his time with Professor Leriche in Strasbourg, and Doctor Quigley, whose tour of the Scandinavian Peninsula has brought him back to us full of ideas.

During the past year there have been some additional workers in the clinic. Dr. Marius Votquenne, who came to us from Brussels as a C. R. B. Fellow, has been investigating ovarian function in the Laboratory of Surgical Research. Dr. Marcel Bérard, son of the Professor of Surgery at Lyons and now a pupil of Professor Leriche in Strasbourg, has come to the Hospital through an interest in the matter of total thyroidectomy for heart disease.

PUBLICATIONS FOR 1935

- ANDERSON, FREDERICK M. and [LINDSLEY, DONALD B.]. Action Potentials from Intercostal Muscles before and after Unilateral Pneumectomy. *J. Lab. & Clin. Med.*, 20, 623-628, 1935.
- BATES, ROBERT R. A Follow-up Study of the Medical Student and Physician Patients Discharged from Trudeau Sanatorium, 1916-1931. *Am. Rev. Tuberc.*, 32, 161-165, 1935.
- BRANCH, CHARLES D. and GROSS, ROBERT E. Aberrant Pancreatic Tissue in the Gastro-Intestinal Tract. *Arch. Surg.*, 31, 200-224, 1935.

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The above list of publications, although it represents as usual the activity of the preceding year, expresses

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the varied form of endeavor going forth. In addition to the publications it seems proper to speak for a moment of investigations under way. Doctor O'Hare and myself, in another joint medical and surgical grouping, have started to investigate the problem of essential hypertension. With the assistance of Doctors Pijoan and Max Schnitker in the Hospital and Doctors Walter and Quigley in the Laboratory both clinical and investigative problems have been pushed forward. Such investigations would seem to re-emphasize that the sympathico-adrenal apparatus and its interrelationship with other of the ductless glands must play a prominent rôle in this condition. This has resulted (1) in a restudy of our total thyroidectomy patients in whom we have shown there is an alteration in the adrenal response; (2) in investigations on the banded renal artery experimental set-up of Goldblatt; (3) in the establishment of new methods for utilizing the photo-electric cell in studying adrenal function; and (4) in investigations of that center for all vegetative functions, the hypothalamus.

Of particular practical importance have been the investigations of Dr. Carl Walter into the whole problem of antisepsis and asepsis, the improvement of methods of sterilization and its reverberations upon surgical technique. His studies have shown the many possible flaws in our present means for established asepsis, and point to a more rigid set-up if we are to protect our patients carefully. These investigations have led him to be called in consultation to our neighboring hospitals, the Massachusetts General Hospital and the Beth Israel Hospital, and even to institutions in the State of Maine.

Finally, in spite of the forced abbreviation of our annual report I am again including the statistical tables previously used for the department of surgery, since they

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set forth quite plainly the story of our work. Table A is of interest chiefly because of the great reduction in

TABLE A
HOSPITAL STATISTICS—DEPARTMENT OF SURGERY
1913-1935

YEAR	Total Discharges	Deaths	General mortality %	Diagnoses*	Excess % of Diagnoses*	Patients operated upon	Case % operated upon	Operations recorded†	Post-operative deaths	Case mortality %	Operative mortality %
1913	690	35	5.00	690	0	477	69.1	693	29	6.1	4.2
1914	1474	83	5.63	1474	0	992	67.3	1361	61	6.1	4.5
1915	1869	89	4.76	2366	26.5	1328	71.1	1526	72	5.4	4.7
1916	2014	93	4.61	2348	16.6	1422	70.6	1632	68	4.8	4.1
1917	2021	74	3.66	2533	25.3	1457	72.1	1639	54	3.7	3.2
1918	1856	71	3.82	2315	24.7	1304	70.2	1474	61	4.7	4.1
1919	2123	102	4.80	2659	25.2	1411	66.5	1563	79	5.6	5.1
1920	2090	91	4.35	2604	24.5	1399	66.9	1602	69	4.9	4.3
1921	2195	107	4.87	2640	20.2	1405	64.0	1591	86	6.1	5.3
1922	2274	110	4.83	2692	18.3	1517	66.7	1552	71	4.7	4.5
1923	2397	135	5.62	3084	28.7	1646	68.7	1713	81	4.9	4.7
1924	2508	144	5.74	3462	38.0	1783	71.1	1843	75	4.2	4.1
1925	2578	134	5.19	3629	40.7	1667	64.7	1762	72	4.3	4.1
1926	2415	143	5.92	3565	47.6	1663	68.9	1789	87	5.2	4.8
1927	2474	135	5.95	3715	50.4	1735	70.1	1858	79	4.5	4.3
1928	2577	135	5.24	3737	45.0	1750	67.9	1930	89	5.1	4.2
1929	2574	136	5.28	3822	48.5	1708	66.3	1874	80	4.7	4.3
1930	2388	109	4.14	3763	57.6	1714	71.8	1892	71	4.1	3.2
1931	2375	125	5.68	4007	68.7	1670	70.3	1849	68	4.1	3.7
1932	2407	129	5.36	4415	83.4	1723	71.5	2337	84	4.8	3.6
1933	2636	133	5.04	5449	106.7	1848	70.1	2132	103	5.5	4.8
1934	2747	130	4.73	5636	105.2	1992	72.5	2311	104	5.2	4.5
1935	2600	102	3.92	5645	117.1	1848	71.1	2143	77	4.2	3.6

* Beginning September, 1932, all diagnoses are recorded; whereas, previously only the chief diagnosis was recorded.

† List does not include cystoscopies, dressings, pyelograms, and application of casts.

operative mortality. This may be perhaps translated by a visualization of Table B which shows our material broken down into the various major divisions for surgical practice and which reveals a continued falling off of

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TABLE B

STATISTICAL STUDY OF VARIETY OF CLINICAL MATERIAL

Based on Operations Performed

		1932	1933	1934	1935
Neurological:					
Central Nervous System.....	Major	322	76	70	38
	Minor	21	80	80	78
Peripheral Nervous System.....		8	20	2	11
Thyroid		43	75	89	59
Thorax	Major	81	54	69	79
	Minor	15	20	36	14
	Bronchoscopy	..	8	17	15
Breast .....		..	47	32	38
Circulatory System:					
Heart and Pericardium.....		3	1	1	3
Blood Vessels		37	23	19	36
Abdomen:					
Stomach		53	38	45	43
Gall-bladder		86	99	88	92
Appendix		162	155	165	135
Small Intestine		11	11	11	10
Large Intestine	Major	57	69	50	39
	Minor	58	107	82	70
Hernia		142	128	169	120
Bones and Joints:					
Fractures		25	10	33	35
Other Diseases		103	76	54	53
Plasters .....		..	66	91	85
Gynecology	Major	198	193	192	185
	Minor	87	167	152	119
	Radium	18	35	25	24
Genito-urinary	Major	197	162	273	159
	Minor	..	..	..	36
	Cystoscopy	525	468	641	579
	I. V. Pyelograms	22	58	97	111
Miscellaneous Major Operations		62	64	35	106
Minor Operations:					
Nose, Ear, Throat		104	145	170	195
Dental		138	102	96	68
Transfusions		70	28	76	58
Miscellaneous		164	210	268	225
Total		2,812	2,795	3,229	2,918

major neurological procedures which are likely to carry a high operative mortality.

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TABLE C

STATISTICAL TABLE WITH NUMBER OF DEATHS AND PERCENTAGE OF AUTOPSIES OBTAINED IN THE DEPARTMENT OF SURGERY

	Deaths	Autopsies	
		Number	Percentage
1923.....	120	63	52.5
1924.....	131	95	72.5
1925.....	113	77	68.1
1926.....	127	77	60.6
1927.....	119	78	65.5
1928.....	128	83	64.8
1929.....	129	90	69.7
1930.....	96	76	79.2
1931.....	109	90	82.6
1932.....	117	84	71.7
1933.....	121	77	63.6
1934.....	130	89	68.4
1935.....	102	64	62.7
Totals	1,542	1,043	67.6

TABLE D

O. D. D. STATISTICS; DEPARTMENT OF SURGERY—1925-1935

	General Surgery			Genito-urinary		
	Total	Old	New	Total	Old	New
1925.....	24,913	21,279	3,634	5,158	4,893	265
1926.....	23,062	19,931	3,131	3,671	3,501	170
1927.....	24,025	20,151	3,874	4,334	4,119	215
1928.....	20,989	17,050	3,939	4,072	3,851	221
1929.....	27,140	22,957	4,183	4,338	4,110	228
1930.....	28,002	23,824	4,178	5,028	4,827	201
1931.....	27,085	22,873	4,212	4,124	3,946	178
1932.....	30,408	25,946	4,462	5,168	5,006	162
1933.....	32,808	28,197	4,611	5,316	5,046	270
1934.....	35,437	30,846	4,591	6,082	5,889	193
1935.....	32,372	28,116	4,256	5,506	5,337	169

Table D shows a considerable falling off in the Out-Door Department attendance. This I believe is a part of the effort of physicians in these hard times to retain every and all kinds of patients under their own control.

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Apparently the depression first increases the number of charity cases in hospitals and then, as the local physicians become alarmed about the great drop in their own clientele and income, returns the patient to the care of the general practitioner. This is an important problem in social welfare, and the balance between the hospital and the general practitioner must be carefully guarded, for there is much to be said on both sides of this issue. In this particular instance the Brigham Hospital has made every possible effort to keep in touch more intimately than ever before with the recommending physician and to see that patients upon their discharge from the Hospital are returned to their referring doctor with a full summary of what occurred in the Hospital and all our impressions regarding future care.

ELLIOTT C. CUTLER,
Surgeon-in-Chief.

Report of the Physician-in-Chief

THE YEAR 1935 has witnessed continuation of the numerous economies in the expense of Hospital operation planned during the preceding year, and other ones have been instituted. Unfortunately the result of these economies is not as evident in reducing our annual deficit as we had hoped, for the simple reason that much, that we have saved by economies, has been used up in paying the increased cost of nearly everything that we use. The welfare of a hospital is closely interwoven into the condition of the country and its administration. Changes that are deliberately made, as well as those that are spontaneous in origin, react and interact so that once started their effects seem never to end. As a result of the continued depression endowed hospitals all over our land have had to run on restricted budgets, and none can say that this has been advantageous to their major aims, the care of the sick and the investigation of disease. The momentum of better days so far has warded off stagnation; the willingness of administration and staff of hospitals to do with less has maintained reasonable efficiency in work. However, the time is approaching when plants must be repaired, renewed or replaced in large measure, and when the stimulus of new undertakings will be needed to maintain efficiency of work and the *esprit de corps* of staff, particularly of the younger members, on whom is to fall in a relatively short time the duty of determining the future position of endowed hospitals. Every effort must be made to pass on to them a physical set-up certainly no less perfect and no less suited to its work than was the one which we of the older group received.

Recognizing the parlous state of medicine in this period of depression, many are inclined to believe that all the ways of medicine need to be radically changed and are advocating revolutionary ideas in the practice of medicine. To me it seems undesirable, at least in a period of depression, not to continue, as best we can, with plans which have been gradually evolved in the past decades, modifying them here and there as needed to suit changed conditions but making no radical innovations. I believe there is a genuine need in our country for the endowed hospital and that at present no significant changes in their plan of activity are desirable. This is assuming that depression will not continue indefinitely. Already we see some evidences of betterment, particularly in the last few months. One very good thing has developed already and that is the determination to carry on an annual drive in Boston for a community fund to aid endowed hospitals, such as the Peter Bent Brigham, as well as other philanthropic agencies, whose work is chiefly the care of the indigent of Boston. I believe from this movement will come great good in a better coordination of charity agencies and that the community fund will be able to replace the income from permanent funds of the Peter Bent Brigham Hospital, permanent funds which had to be sacrificed to meet deficits in the years of depression since 1929.

The Peter Bent Brigham Hospital is very fortunate in its affiliation with the Harvard Medical School, whose chief objective is the training of physicians and the investigation of disease. With that affiliation the Hospital staff has not been compelled to lack that stimulating influence of teaching and of investigation, without which deterioration in the work of this Hospital is well nigh inevitable. This, in a new way, demonstrates the wisdom of the Corporation of the Peter Bent Brig-

ham Hospital in forming an affiliation at the outset with the Harvard Medical School and in strengthening these ties in succeeding years. It is unthinkable that the Hospital should not continue to profit very largely from an intimate association with the Harvard Medical School.

Again for sake of economy the annual report of the Hospital has been abbreviated. I hope that in another year the pages showing data about present and past members of the staff, at least, may be restored. After all, apart from the care we give our patients, the men we train are our best product; what these pages contained shows just what these men have accomplished as a result of the training they received at the Peter Bent Brigham Hospital; the list of those men constitutes a graphic display of one of our most important accomplishments.

Service in Psychiatry. For house officers coming on duty June 15, 1935, a new arrangement of service was installed, by which each house officer hereafter will receive four months of training in psychiatry. By the very cordial cooperation of the Commissioner of Mental Disease of the Commonwealth of Massachusetts our house officers will be taken into State Hospitals for four months of practical training in psychiatry. This training will follow a four months' period in our clinical laboratory. Our medical house officer service thus will be extended to a total period of twenty instead of the former sixteen months. The first group of men commenced their psychiatric service on October 15, two going to the Boston State Hospital and one to the Worcester State Hospital. It is my belief that this arrangement will give to our house officers a definitely better training than they had been receiving previously; it is a recognition of the increasingly important part that is played in disease by the mind.

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Publications for 1935. During 1935 certain lines of investigation have been pursued by the members of the staff, as shown by the following list of publications. Some of these represent work actually done in the preceding year, but, according to our custom, are noted in the Annual Report only after their completion and publication, thereby avoiding duplication in being noted once when the work is under way and the second time when completed and published.

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Physician-in-Chief, pro tempore. In 1935 came to us as twenty-first Physician-in-Chief, *pro tempore*, Dr. Alva H. Gordon, Clinical Professor of Medicine in McGill University and Visiting Physician to the Montreal General Hospital. An unobtrusive, charming personality with a keen sense of humor, a clinician of unusual skill in diagnosis and treatment and an enthusiastic bedside teacher of medicine, these characteristics combined in Doctor Gordon to make of him one of our most acceptable *pro temps*; why he had been so admired and beloved by the younger men from the Montreal

REPORT OF THE PHYSICIAN-IN-CHIEF

General Hospital, who from time to time have served on our resident staff, became very obvious to us during the time of his stay at the Peter Bent Brigham Hospital. We do appreciate the sacrifice made by those who yearly come to live among us for a week and spend so much time in our wards demonstrating their viewpoint and clinical ways.

Changes in Personnel. In the autumn of 1935 Dr. C. Sidney Burwell came to Boston as Dean of the Harvard Medical School and Research Professor of Medicine, after a notable service as Professor of Medicine at Vanderbilt University, Nashville, Tenn. It has been our good fortune to have him join our staff as Physician. A laboratory for clinical physiologic investigation of the circulation has been placed at his disposal in which he has the aid of an additional Assistant Resident Physician. Doctor Burwell participates, too, in ward rounds. To have him so actively concerned in hospital work with us greatly strengthens our staff. We are very happy to have him.

Early in 1935 Dr. William P. Murphy, M.D., Harvard '22, was promoted from Associate to Senior Associate in Medicine following a continuous service on our staff commencing as Assistant Resident Physician in 1922. A little later in the year Dr. Lyman H. Hoyt, M.D., Iowa '25, was promoted from Junior Associate to Associate in Medicine after a continuous service on the Medical Staff which began as Assistant Resident Physician in 1926.

During the year Dr. Clifford L. Derick, M.D., McGill '18, resigned from the position of Physician to which he was appointed July 1, 1928, to enter private practice in Boston; fortunately for us he will continue a member of our visiting staff as Senior Associate in Medicine.

PETER BENT BRIGHAM HOSPITAL

By an oversight on my part certain appointments to our visiting staff have failed to be noted in previous annual reports. In 1933 Dr. Earle A. Harvey, M.D., Harvard '29, Medical House Officer in 1929-31, after a service at the Mercy Hospital, Denver, Col., returned to Boston and was appointed Junior Associate in Medicine with us. In 1934 Dr. Marshall N. Fulton, M.D., Hopkins '25, Medical House Officer 1926-27, Assistant Resident Physician 1927-29, Resident Physician 1929-31, Junior Associate in Medicine 1931-34, was appointed Physician to the Peter Bent Brigham Hospital to fill a vacancy created by the resignation at the end of 1932 of Dr. Channing Frothingham. Also during 1934 Dr. F. William Marlow, Jr., M.D., Harvard '27, Medical House Officer 1927-28, was appointed Associate in Medicine and Dr. David L. Halbersleben, M.D., Harvard '28, Medical House Officer 1928-29, and Dr. Charles F. Walcott, M.D., Harvard '31, Medical House Officer 1932-33, were made Junior Associates in Medicine.

The addition to the Visiting Staff in increasing number of men engaged in private practice in greater Boston, as are nearly all of these men, makes possible a better service to certain special groups of ambulatory patients coming to our Out-Door Department and adds others to the men available for ward visits, for it is our custom to provide periods of ward visitation to all members of the visiting medical staff. It is my belief that patients, resident staff and medical students definitely profit by contacts with these younger men actively engaged in private office and house practice, as well as with the older group, largely engaged in consultation and hospital work. With a relatively large staff, so constituted and so working, the Hospital is but extending, too, its influence more widely in the training of men for high-grade practice of medicine. It is our hope that members

REPORT OF THE PHYSICIAN-IN-CHIEF

of the staff individually profit from their association with the Hospital in return for what they give in valued service to the Hospital.

During 1935 Drs. John G. Gibson, M.D., Harvard '32, and Arthur B. Richter, M.D., Indiana '31, resigned as Assistant Resident Physicians, Gibson to become research fellow in medicine at the Harvard Medical School and Richter to enter practice in Indiana. These vacancies were filled by Dr. Clayton B. Ethridge, M.D., Virginia '33, formerly medical house officer at the Peter Bent Brigham Hospital, later Research Fellow at the Harvard Medical School, and Dr. Harold H. Marquis, M.D., California '34, formerly assistant resident, San Francisco Hospital. Dr. Paul B. Cassaday, previously medical house officer, was appointed as an additional Assistant Resident Physician to work under Doctor Burwell's guidance.

As Medical House Officers the following men completed their service and commenced other work: Dr. Edward A. Delarue, Jr., M.D., Virginia '33, to become resident physician at Kings County Hospital, Brooklyn, N. Y.; Dr. Harold N. Johnson, M.D., Nebraska '33, to become Pathological House Officer at the Peter Bent Brigham Hospital; Dr. George W. Lynch, M.D., Harvard '33, to carry on studies of diabetes under Doctor Joslin in Boston; Dr. Archibald W. Diack, M.D., Michigan '33, to become Surgical House Officer at the Peter Bent Brigham Hospital; Dr. Theodore H. Ingalls, M.D., Harvard '33, to investigate cevitic acid excretion at the Children's Hospital, Boston, under Doctor Blackfan; Dr. William H. Myhre, M.D., St. Louis University '31, to become House Officer in Roentgenology at the Peter Bent Brigham Hospital; Dr. Paul B. Cassaday to become Assistant Resident Physician at the Peter Bent Brigham Hospital; Dr. Harry A. Warren, M.D., Northwestern

PETER BENT BRIGHAM HOSPITAL

'34, to begin practice in Boston with Doctor Hoyt of our staff; and Dr. Benjamin V. White, Jr., M.D., Harvard '34, to work in psychiatry under Professor Kahn at Yale University.

In closing my twenty-second annual report as Physician-in-Chief it is pleasant to note that, hard times notwithstanding, efficiently our patients have been cared for; staff and hospital workers have served cheerfully and creditable investigation has been carried on to be noted in the list of publications of a succeeding year. A fine spirit of cooperation and service has always existed at the Peter Bent Brigham Hospital; in no wise did this abate in 1935. From time to time letters come from patients commending the care they received and particularly emphasizing the friendliness they encountered in doctors, nurses and employees; such make us feel that our work has been well done. To all, who worked together to that end, I extend my hearty thanks.

HENRY A. CHRISTIAN,
Physician-in-Chief.

DECEMBER 31, 1935.

REPORT OF THE PHYSICIAN-IN-CHIEF

Summary of Medical Statistics

JANUARY 1, 1935 TO JANUARY 1, 1936

Total number of medical admissions in 1935....	2,033	
Total number of medical cases remaining in the wards, January 1, 1935	83	
	<hr/>	2,116
Total number medical readmissions discharged in 1935	583	
Total number of medical new cases discharged in 1935	1,460	
	<hr/>	2,043
Total number of medical cases remaining in the wards, January 1, 1936	73	
	<hr/>	2,116
Total number of deaths		180

In the past, our annual report has included the following lists:

Visiting Physicians and Surgeons *pro tempore*
Traveling Fellows in Surgery
George Gorham Peters Traveling Fellows
Harvey Cushing Fellows
Register of Present Members of the Staff
Register of Former Members of the Staff
Former Voluntary Graduate Assistants
Register of Former Members of the Corporation

These lists are being temporarily omitted as a measure of economy.

Officers of the Institution, 1936

President

WILLIAM AMORY

Treasurer

EDMUND D. CODMAN

Secretary

HENRY B. CABOT

MEMBERS OF THE CORPORATION

Appointed

Jan. 5, 1921	*WILLIAM AMORY	179 Commonwealth Ave.	Boston
Nov. 8, 1934	HENRY B. CABOT	50 Federal St.	Boston
May 8, 1902	EDMUND D. CODMAN	27 Kilby St.	Boston
Mar. 25, 1931	RICHARD C. CURTIS	30 State St.	Boston
Feb. 13, 1936	ROBERT CUTLER	1 Federal St.	Boston
May 14, 1936	RIPLEY L. DANA	1 Federal St.	Boston
Mar. 26, 1925	PAUL E. FITZPATRICK	104 Kingston St.	Boston
June 16, 1909	†IRVIN McD. GARFIELD	30 State St.	Boston
Apr. 13, 1933	THEODORE LYMAN	105 Heath St.	Chestnut Hill
Mar. 27, 1924	RICHARD S. RUSSELL	50 State St.	Boston

STANDING COMMITTEES OF THE CORPORATION

Building Committee

IRVIN McD. GARFIELD, *Chairman* THEODORE LYMAN
ROBERT CUTLER PAUL E. FITZPATRICK
JOSEPH B. HOWLAND, M.D., *Secretary*

Auditing Committee

THEODORE LYMAN

Committee on Finances

WILLIAM AMORY RICHARD C. CURTIS
EDMUND D. CODMAN RICHARD S. RUSSELL

Committee on Heat, Light, and Power

HENRY B. CABOT PAUL E. FITZPATRICK
EDMUND D. CODMAN

* Appointed by the Governor of the Commonwealth under an act approved May 8, 1909. Commission expires May 1, 1936.

† Appointed by the Governor of the Commonwealth under an act approved May 8, 1909. Commission expires May 11, 1939.

PETER BENT BRIGHAM HOSPITAL

Committee on Nominations

HENRY B. CABOT

RICHARD C. CURTIS

Committee on Rules

IRVIN MCD. GARFIELD

RICHARD C. CURTIS

EDMUND D. CODMAN

SCHOOL OF NURSING

Advisory Committee

WILLIAM AMORY

HENRY A. CHRISTIAN, M.D.

IRVIN MCD. GARFIELD

ELLIOTT C. CUTLER, M.D.

JOSEPH B. HOWLAND, M.D., *Superintendent*

PRES. ADA COMSTOCK

CARRIE M. HALL, R.N., *Principal*

MRS. GEORGE C. SHATTUCK

MRS. COLLINS GRAHAM

LADIES' SOCIAL SERVICE COMMITTEE

MRS. DAVID CHEEVER, *Chairman*

MRS. F. MURRAY FORBES

MISS KATHERINE A. HOMANS, *Secretary*

MRS. DONALD MCKAY FROST

MRS. ROGER B. MERRIMAN, *Treasurer*

MRS. F. L. HIGGINSON

MRS. J. A. LOWELL BLAKE

MRS. JOHN HOMANS

MRS. HARRY C. BLOTNER

MRS. LYMAN H. HOYT

MRS. DAVID CHEEVER, JR.

MRS. WALTER HUNNEWELL

MRS. RANDALL CLIFFORD

MRS. FRANC D. INGRAHAM

MRS. F. D. COCHRANE

MRS. L. H. H. JOHNSON

MRS. ELLIOTT C. CUTLER

MRS. SAMUEL A. LEVINE

MRS. GEORGE P. DENNY

MRS. ROBERT T. MONROE

MRS. E. STANLEY EMERY, JR.

MRS. RICHARD C. PAINE

MRS. REGINALD FITZ

MRS. MERRILL C. SOSMAN

MRS. S. BURT WOLBACH

VISITING COMMITTEE FOR 1936

THEODORE LYMAN	January
PAUL E. FITZPATRICK.....	February
RICHARD C. CURTIS.....	March
RICHARD S. RUSSELL.....	April
HENRY B. CABOT	May
ROBERT CUTLER	June
EDMUND D. CODMAN.....	July
.....	August
IRVIN MCD. GARFIELD.....	September
.....	October
WILLIAM AMORY	November
.....	December

PETER BENT BRIGHAM HOSPITAL

EXECUTIVE COMMITTEE OF THE STAFF

HENRY A. CHRISTIAN, M.D. S. BURT WOLBACH, M.D.
ELLIOTT C. CUTLER, M.D. JOSEPH B. HOWLAND, M.D., *Secretary*

ADMINISTRATIVE DEPARTMENT

Superintendent

Service began

May 1, 1919 JOSEPH B. HOWLAND, M.D.

Assistant Superintendents

Mar. 5, 1934 NORBERT A. WILHELM, M.D.
Mar. 5, 1934 WILSON WARNER KNOWLTON, M.D.

Executive Assistant

June 18, 1935 EVA McCOMB THOMAS, R.N.

BOARD OF CONSULTATION

Appointed

Mar. 25, 1912 WALTER B. CANNON, M.D., *Consulting Physiologist*
Mar. 8, 1928 GEORGE R. MINOT, M.D., *Consulting Physician*
Apr. 12, 1923 HANS ZINSSER, M.D., *Consulting Bacteriologist*
Oct. 13, 1932 E. LAWRENCE OLIVER, M.D., *Consulting Dermatologist*
Jan. 1, 1933 CHANNING FROTHINGHAM, M.D., *Consulting Physician*
Jan. 1, 1933 LEROY M. S. MINER, D.M.D., *Consulting Dental Surgeon*
Mar. 8, 1934 J. HERBERT WAITE, M.D., *Consulting Ophthalmologist*
Oct. 10, 1935 A. BAIRD HASTINGS, M.D., *Consulting Chemist*

MEDICAL DEPARTMENT

Service began

May 1, 1912 HENRY A. CHRISTIAN, M.D., *Physician-in-Chief*
Sept. 1, 1922 REGINALD FITZ, M.D., *Physician*
Sept. 1, 1934 MARSHALL N. FULTON, M.D., *Physician*
Sept. 1, 1935 C. SYDNEY BURWELL, M.D., *Physician*
July 1, 1915 JAMES P. O'HARE, M.D., *Senior Associate in Medicine*
Aug. 8, 1919 SAMUEL A. LEVINE, M.D., *Senior Associate in Medicine*
May 24, 1928 JOSEPH C. AUB, M.D., *Senior Associate in Medicine*
Jan. 24, 1935 WILLIAM P. MURPHY, M.D., *Senior Associate in Medicine*
Sept. 1, 1935 CLIFFORD L. DERICK, M.D., *Senior Associate in Medicine*
Dec. 12, 1912 NATHANIEL K. WOOD, M.D., *Associate in Medicine*
July 1, 1915 GEORGE P. DENNY, M.D., *Associate in Medicine*
Sept. 1, 1915 I. CHANDLER WALKER, M.D., *Associate in Medicine*
Sept. 12, 1919 DONALD J. MACPHERSON, M.D., *Associate in Medicine*
Nov. 12, 1925 GUSTAVE P. GRABFIELD, M.D., *Associate in Medicine*
May 10, 1926 EDWARD S. EMERY, JR., M.D., *Associate in Medicine*
Dec. 8, 1932 ROBERT T. MONROE, M.D., *Associate in Medicine*

PETER BENT BRIGHAM HOSPITAL

Service began

Jan. 1, 1934	F. WILLIAM MARLOW, JR., M.D., <i>Associate in Medicine</i>
Jan. 1, 1934	HARRY H. BLOTNER, M.D., <i>Associate in Medicine</i>
May 9, 1935	LYMAN H. HOYT, M.D., <i>Associate in Medicine</i>
Dec. 22, 1930	JOHN M. FLYNN, M.D., <i>Junior Associate in Medicine</i>
Dec. 8, 1932	WILLIAM T. SALTER, M.D., <i>Junior Associate in Medicine</i>
Oct. 26, 1933	EARLE A. HARVEY, M.D., <i>Junior Associate in Medicine</i>
Oct. 11, 1934	DAVID L. HALBERSLEBEN, M.D., <i>Junior Associate in Medicine</i>
Oct. 11, 1934	CHARLES F. WALCOTT, M.D., <i>Junior Associate in Medicine</i>
Nov. 1, 1935	HARRY A. WARREN, M.D., <i>Junior Associate in Medicine</i>
Jan. 23, 1936	GEORGE W. LYNCH, M.D., <i>Junior Associate in Medicine</i>
Sept. 1, 1933	EUGENE C. EPPINGER, M.D., <i>Resident Physician</i>
July 15, 1933	MAURICE A. SCHNITKER, M.D., <i>Assistant Resident Physician</i>
Aug. 1, 1934	ANDREW W. CONTRATTO, M.D., <i>Assistant Resident Physician</i>
Sept. 1, 1934	WILLIAM EVANS, M.D., <i>Assistant Resident Physician</i>
Aug. 1, 1935	HAROLD MARQUIS, M.D., <i>Assistant Resident Physician</i>
Sept. 1, 1935	CLAYTON B. ETHRIDGE, M.D., <i>Assistant Resident Physician</i>
Jan. 1, 1936	HOWARD A. LINDBERG, M.D., <i>Assistant Resident Physician</i>
Mar. 1, 1936	JAMES A. KENNEDY, M.D., <i>Assistant Resident Physician</i>

SURGICAL DEPARTMENT

Service began

Sept. 1, 1932	ELLIOTT C. CUTLER, M.D., <i>Surgeon-in-Chief</i>
Oct. 13, 1932	HARVEY CUSHING, M.D., <i>Surgeon-in-Chief Emeritus</i>
May 1, 1912	JOHN HOMANS, M.D., <i>Surgeon</i>
Oct. 1, 1912	DAVID CHEEVER, M.D., <i>Surgeon</i>
June 19, 1916	WILLIAM C. QUINBY, M.D., <i>Urological Surgeon</i>
Mar. 26, 1936	FRANK R. OBER, M.D., <i>Orthopedic Surgeon</i>
Jan. 9, 1936	LYMAN G. RICHARDS, M.D., <i>Otolaryngologist</i>
June 15, 1924	FRANCIS C. NEWTON, M.D., <i>Senior Associate in Surgery</i>
Mar. 8, 1934	TRYGVE GUNDERSON, M.D., <i>Associate in Ophthalmology</i>
Oct. 7, 1929	MOSES S. STROCK, D.M.D., <i>Dental Surgeon</i>
Oct. 1, 1928	HARLAN F. NEWTON, M.D., <i>Junior Associate in Surgery</i>
Apr. 24, 1930	DONALD MACDONALD, M.D., <i>Junior Associate in Otolaryngology</i>
May 1, 1933	WILLIAM T. GREEN, M.D., <i>Junior Associate in Orthopedic Surgery</i>
Oct. 26, 1933	ALBERT H. BREWSTER, M.D., <i>Junior Associate in Orthopedic Surgery</i>
July 1, 1934	ROBERT ZOLLINGER, M.D., <i>Junior Associate in Surgery</i>
Oct. 10, 1935	FLETCHER H. COLBY, M.D., <i>Junior Associate in Urological Surgery</i>
Dec. 13, 1934	GEORGE F. WILKINS, M.D., <i>Junior Associate in Surgery</i>
Mar. 28, 1935	LEE G. KENDALL, M.D., <i>Junior Associate in Surgery</i>
Mar. 1, 1936	THOMAS B. QUIGLEY, M.D., <i>Junior Associate in Surgery</i>

OFFICERS OF THE INSTITUTION

Service began

Nov. 1, 1935	PHILIP SHAMBAUGH, M.D., <i>Harvey Cushing Fellow</i>
July 1, 1935	MAX T. SCHNITKER, M.D., <i>Neurological Fellow</i>
July 1, 1935	CHARLES D. BRANCH, M.D., <i>Resident Surgeon</i>
June 15, 1935	J. HARTWELL HARRISON, M.D., <i>Urological Fellow</i>
Mar. 1, 1935	WALTER A. REILING, M.D., <i>Assistant Resident Surgeon</i>
July 1, 1935	SAMUEL M. DUPERTUIS, M.D., <i>Assistant Resident Surgeon</i>
Nov. 1, 1935	ROBERT E. GROSS, M.D., <i>Assistant Resident Surgeon</i>
Mar. 1, 1936	CARL W. WALTER, M.D., <i>Assistant Resident Surgeon</i>

PATHOLOGICAL DEPARTMENT

Service began

Dec. 1, 1916	S. BURT WOLBACH, M.D., <i>Pathologist</i>
Nov. 1, 1935	ORVILLE T. BAILEY, M.D., <i>Resident Pathologist</i>

ROENTGENOLOGICAL DEPARTMENT

Service began

May 15, 1922	MERRILL C. SOSMAN, M.D., <i>Roentgenologist</i>
Jan. 12, 1928	EDWARD C. VOGT, M.D., <i>Associate in Roentgenology</i>
Sept. 8, 1933	HUGH F. HARE, M.D., <i>Associate in Roentgenology</i>
July 1, 1935	WALTER W. VAUGHAN, M.D., <i>Assistant Resident in Roentgenology</i>
July 1, 1935	WILLIAM N. MYHRE, M.D., <i>Assistant Resident in Roentgenology</i>

MEDICAL HOUSE OFFICERS

Service began

Service ended

Nov. 1, 1933	EDWARD A. DELARUE, JR., M.D.....	Mar. 1, 1935
Nov. 1, 1933	HARALD N. JOHNSON, M.D.....	Mar. 1, 1935
Nov. 1, 1933	GEORGE W. LYNCH, M.D.....	Mar. 1, 1935
Mar. 1, 1934	ARCHIBALD W. DIACK, JR., M.D.....	July 1, 1935
Mar. 1, 1934	THEODORE H. INGALLS, M.D.....	July 1, 1935
Mar. 1, 1934	WILLIAM N. MYHRE, M.D.....	July 1, 1935
July 1, 1934	PAUL B. CASSADAY, M.D.....	Nov. 1, 1935
July 1, 1934	HARRY A. WARREN, M.D.....	Nov. 1, 1935
July 1, 1934	BENJAMIN V. WHITE, JR., M.D.....	Nov. 1, 1935
Nov. 1, 1934	JAMES A. KENNEDY, M.D.....	Mar. 1, 1936
Nov. 1, 1934	SAMUEL J. KING, M.D.....	Mar. 1, 1936
Nov. 1, 1934	JOHN A. BOONE, M.D.....	Mar. 1, 1936

Service will end

Mar. 1, 1935	JOHN B. ALSEVER, M.D.....	July 1, 1936
Mar. 1, 1935	GARRETT L. SULLIVAN, JR., M.D.....	July 1, 1936
Mar. 1, 1935	LAWRENCE E. PUTNAM, M.D.....	July 1, 1936
June 15, 1935	STANLEY KIMBALL, M.D.....	Mar. 1, 1937
June 15, 1935	ARTHUR L. WATKINS, M.D.....	Mar. 1, 1937
June 15, 1935	JOSEPH L. MILLER, JR., M.D.....	Mar. 1, 1937
Oct. 15, 1935	RICHARD H. LYONS, M.D.....	July 1, 1937
Oct. 15, 1935	CHARLES P. ROBERTS, M.D.....	July 1, 1937

OFFICERS OF THE INSTITUTION

<i>Service began</i>			<i>Service will end</i>	
Oct. 15, 1935	CHARLES BRENNER, M.D.....	July 1, 1937		
Oct. 15, 1935	WILLIAM J. CLAUSER, M.D.....	Nov. 1, 1936		
Oct. 15, 1935	CHARLES B. KIMMEL, M.D.....	Nov. 1, 1936		
Oct. 15, 1935	DALE G. FRIEND, M.D.....	Nov. 1, 1936		
Feb. 15, 1936	JAMES E. ROBERTSON, M.D.....	Nov. 1, 1937		
Feb. 15, 1936	ARTHUR J. HADLER, M.D.....	Nov. 1, 1937		
Feb. 15, 1936	ROY L. SWANK, M.D.....	Nov. 1, 1937		

SURGICAL HOUSE OFFICERS

<i>Service began</i>			<i>Service ended</i>	
Nov. 1, 1933	JOHN H. HARRISON, M.D.....	Mar. 1, 1935		
Nov. 1, 1933	HALL SEELY, M.D.....	Mar. 1, 1935		
Mar. 1, 1934	PRENTISS L. HYDER, M.D.....	July 1, 1935		
Mar. 1, 1934	THOMAS B. QUIGLEY, M.D.....	July 1, 1935		
July 1, 1934	BENJAMIN R. REITER, M.D.....	Nov. 1, 1935		
July 1, 1934	EUGENE A. STEAD, M.D.....	Nov. 1, 1935		
Nov. 1, 1934	RICHARD C. DURANT, M.D.....	Mar. 1, 1936		
Nov. 1, 1934	ROBERT R. BATES, M.D.....	Mar. 1, 1936		
			<i>Service will end</i>	
Mar. 1, 1935	FREDERICK M. ANDERSON, M.D.....	July 1, 1936		
Mar. 1, 1935	RICHARD L. PETERSON, M.D.....	July 1, 1936		
June 15, 1935	DONALD T. HALL, M.D.....	Nov. 1, 1936		
June 15, 1935	WILLIAM I. ABELL, JR., M.D.....	Nov. 1, 1936		
July 1, 1935	PAUL F. JARRETT, D.M.D.....	July 1, 1936		
Oct. 15, 1935	ARCHIBALD W. DIACK, M.D.....	Mar. 1, 1937		
Oct. 15, 1935	ROBERT D. WHITFIELD, M.D.....	Mar. 1, 1937		
Feb. 15, 1936	JOHN F. BELL, M.D.....	July 1, 1937		
Feb. 15, 1936	RICHARD T. MUNCE, M.D.....	July 1, 1937		

PATHOLOGICAL HOUSE OFFICERS

<i>Service began</i>		
July 1, 1935	HARALD N. JOHNSON, M.D.	
Mar. 1, 1936	JOHN E. DUNPHY, M.D.	

SCHOOL OF NURSING

*Superintendent of Nurses and
Principal of the School of Nursing*

<i>Service began</i>		
July 1, 1912	CARRIE M. HALL, R.N.	

Assistant Superintendent of Nurses

June 1, 1928	MARY C. GILMORE, B.S., R.N.	
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Instructor in Theory

Sept. 3, 1935	ELSIE L. CAMPBELL, B.S., R.N.	
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PETER BENT BRIGHAM HOSPITAL

Instructor in Practice

Service began

Sept. 1, 1929 BERNICE J. SINCLAIR, R.N.

Instructor in Operating Room Technique

Apr. 26, 1934 LORNA C. DILL, R.N.

Supervisors

June 1, 1929 HELEN A. NEWHALL, A.B., R.N.

Sept. 6, 1932 FRANCES M. DAGGETT, R.N.

Oct. 13, 1927 RACHEL T. ADAMS, R.N.

Nov. 20, 1932 CATHERINE RICHARDS, R.N.

Night Supervisors

Feb. 17, 1936 ROBERTA M. CANNAWAY, R.N.

Feb. 17, 1936 MARY E. THOMPSON, R.N.

Chief—Social Service Department

Aug. 17, 1914 ALICE M. CHENEY, R.N.

Dietitian

Aug. 1, 1931 GERTRUDE McDONALD, B.S.

Apothecary

Dec. 2, 1912 HARRY H. COMAN

Clerk

Apr. 29, 1912 LIDA E. CRAWFORD

Record Librarians

House Records

June 16, 1922 EDITH M. ROBBINS

Out-Patient Records

Sept. 1, 1934 PAULINE E. SMITH

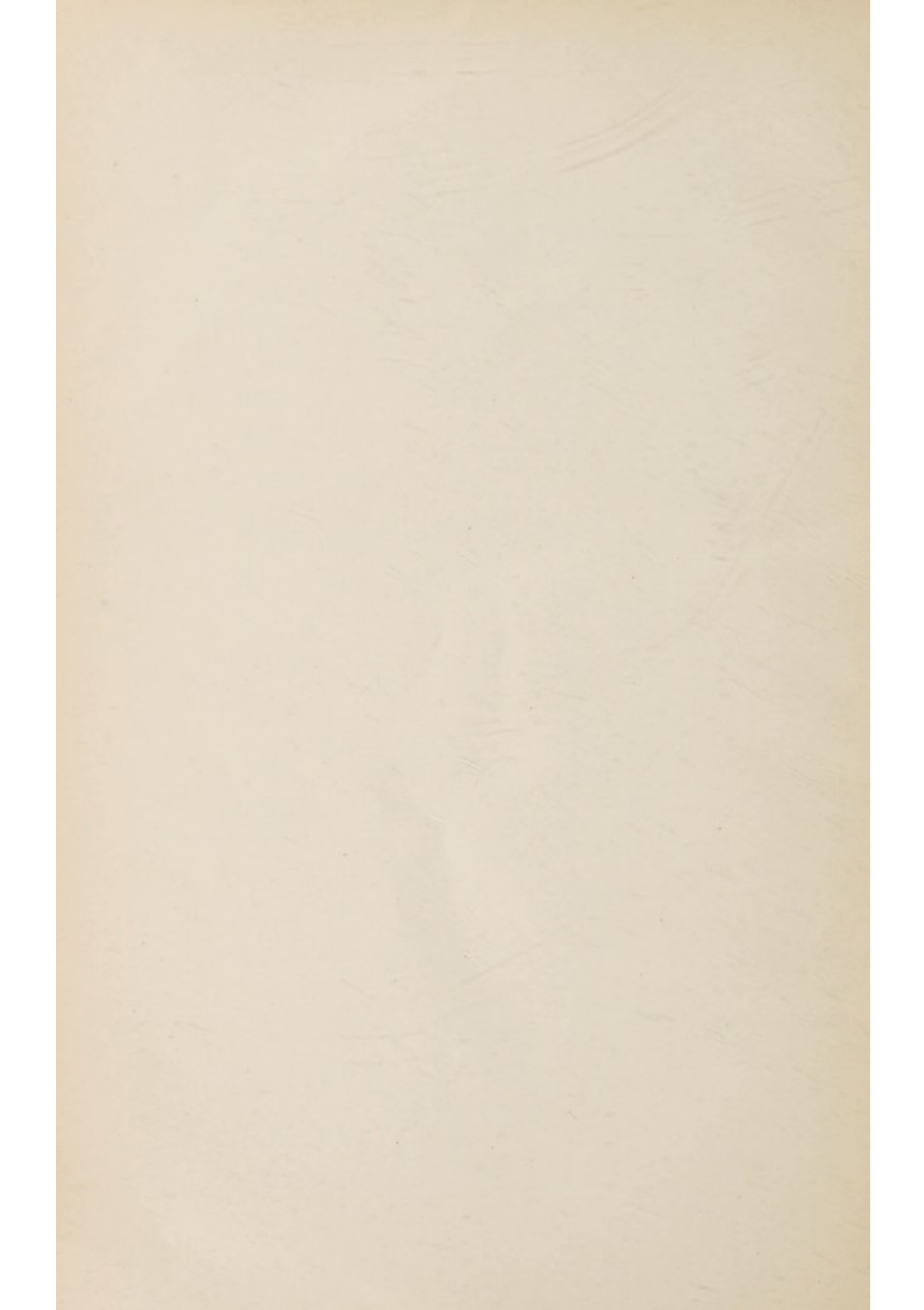
Housekeeper

Sept. 1, 1933 ANN M. LEWIS

Chief—Mechanical Departments

Oct. 21, 1911 JOHN A. AITKEN





FORM OF BEQUEST

I give and bequeath to the Peter Bent Brigham Hospital, a Corporation established under the laws of the Commonwealth of Massachusetts, the sum of _____ dollars, the same to be used for the furtherance of its charitable work.

