## APPENDIX V

charged at night, and the patient was put in the care of a rough, dirty Swede, who had been hired that very day, and had never before acted as a nurse in an asylum. To m protest the physician replied that he "could trust only hi own trained nurses - others were liable to drink and dis obey orders." Two weeks later my patient was found com pletely terrorized by this man and complained bitterly of hi treatment and lack of companionship. He saw the docto for fifteen minutes daily, but was with the attendant all th time. The man's habits were filthy, and he was better fitte for a stableman than for a nurse. The patient offered t pay for the services of his former nurse, and to pay hi board in addition to the fifty dollars per week which he pai for his single room. This proposition was declined. Hence I removed him to another institution, where he is bein properly nursed, and is recovering rapidly.

Here are five cases in five different private asylums near New York, all of which have a good reputation. In all the same abuse exists — unintelligent care is the rule. In a these places the doctor in charge sees the patient once a dat or every other day, as all have offices in New York. In a the food is plain but wholesome, and served unattractive and, usually, cold. In all prices from \$50 to \$100 a wee are charged. Double the charge would have been chee fully paid for skilful attendants in every case mentioned. Secondly, as to the remedy:

It is well known that at Bloomingdale Asylum there is good training school for nurses, from which graduates com out every year competent to take care of cases of ment disease. If it became imperative upon these asylum physicians to employ trained nurses of good capacity, they coube found and supplied. But since there is no demand madexcepting by patients whose statements are not accepted

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