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FORTY-THIRD REPORT

OF THE

NOVA SCOTIA

HOSPITAL FOR THE INSANE,

FOR THE YEAR 1899-1900

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HALIFAX, N. S. :  
COMMISSIONER OF PUBLIC WORKS AND MINES,  
QUEEN'S PRINTER.  
1901.

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T. C. ALLEN & Co., PRINTERS, HALIFAX.

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HOSPITAL FOR THE INSANE, HALIFAX  
Report

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NOVA SCOTIA HOSPITAL FOR THE INSANE,

HALIFAX, N. S.

1899-1900.

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**COMMISSIONER :**

HON. CHAS E. CHURCH, M. P. P., M. E. C.,  
*Commissioner of Public Works and Mines.*

R. T. MURRAY, *Secretary to Commissioner.*

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**RESIDENT OFFICERS :**

W. H. HATTIE, M. D., *Medical Superintendent.*

J. A. MCKENZIE, M. D., *Assistant Medical Superintendent.*

E. F. MOORE, M. D., *Assistant Physician.*

AUBREY S. HUNT, *Bursar.*

LEONARD LEADLEY, *Engineer.*

MRS. R. D. DICKSON, *Housekeeper.*

MISS H. SAMPSON, *Supervisor and Superintendent of Nurses.*

MISS E. McDONALD, *Assistant Supervisor.*

MISS E. OIGLVIE, *Night Supervisor.*

ALEX. NICHOLSON, }  
ALEX. GRAHAM, } *Head Attendants, Male Wards.*

WASH DC 20540

MEMORANDUM FOR THE RECORD

DATE: 10/15/54

TO: SAC, NEW YORK

FROM: SA [Name], NEW YORK

SUBJECT: [Subject Name]

RE: [Reference]

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Forty-Third Annual Report  
OF THE  
MEDICAL SUPERINTENDENT  
OF THE  
Nova Scotia Hospital for the Insane.

HON. CHAS. E. CHURCH,  
*Commissioner Public Works and Mines:*  
Sir:—

I have the honor to submit the forty-third annual report of the operations of the Nova Scotia Hospital for the Insane.

The number of admissions was 127. Of these, 25 had been patients here before, so that the number of new patients received was 102.

The discharges, including deaths, numbered 102, so that we end the year with 25 more patients on the register than were enrolled when the year commenced. It is thus evident that we are even more in need of the increased accommodation which I urged in my last annual report than was the case when that report was prepared.

Of those discharged, 51 were regarded as cured. This is equivalent to 40.2 per cent. of the admissions, which is rather below our average of previous years, which was 44.2 per cent. This falling-off is probably more apparent than real, however, as we admitted an unusually large number of patients late in the year, and as a consequence more than the ordinary proportion have not been in the hospital for a sufficiently long period to effect recovery. I am hopeful that our statistics next year will shew such a proportion of recoveries as to restore the mean of per centages since the establishment of the hospital.

The causes of death are enumerated in Table V. By reference to this table it will be seen that pulmonary tuberculosis again caused a large share of the deaths, no less than 10 out of a total of 26, or 38.46 per cent. This is exactly the same percentage as last year. The prevalence of this disease in our hospital is alarming, and I see little prospect of lessening it under present conditions. The crowded state of our wards makes the isolation of tuberculous patients almost impossible, and the careless habits of many of the mentally deranged is particularly favourable to the spread of the disease.

A synopsis of our statistics for the year is shewn in the table:—

	M.	F.	Total.
Number of patients on register, Oct. 1, 1899...	189	187	376
Admitted during year ending Sept. 30, 1900...	58	69	127
Total under treatment for year.....	247	256	503
Total discharged for year.....	49	53	102
Total remaining on register Sept. 30, 1900....	198	203	401
Daily average.....	197.8	202.4	400.2
Discharged as recovered.....	24	27	51
Discharged as improved.....	10	9	19
Discharged as stationery or unimproved.....	3	3	6
Died.....	12	14	26
	49	53	102
Percentage of deaths on daily average.....	6	6.9	6.4
Percentage of deaths on whole number under treatment.....	4.8	5.4	5.1
Percentage of cures on admission.....	41.4	39.1	40.2
Number out on trial Sept. 30, 1900.....	11	14	25

No departure has been made in the matter of medical administration. We continue to endeavour to promote the welfare of our patients by resort to so-called "moral means." That is to say, by occupation, recreation and entertainment, we try to avert the tendency to morbid thought, and to direct the energy of the patient into proper channels. Mechanical restraint is but seldom used, save for surgical reasons, and as much freedom as is possible is granted to all those whose condition will permit it. The use of sedative, hypnotic and depressive drugs is avoided as much as is possible, while every effort is made to improve the general health in the hope that as this end is attained it may be accompanied by a corresponding result in the mental condition. Such, in brief, is the treatment of mental disorder to-day.

I regret that our equipment is such that we cannot carry out the various features of this plan of treatment as completely as we would wish, but I am confident that it is only a question of time until this disability will be a thing of the past. I can hardly conceive that any expenditure of money which would result in the betterment of the condition of the mentally disordered, with corresponding improvement of the prospect for cure, could be regarded as an extravagance. The possibility of doom to chronic insanity as a result of insufficient provision for proper care is almost too terrible to think of, and yet it is a possibility that must not be overlooked. And it must be considered

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not only from the sentimental standpoint, for the speedy and permanent cure of mental disorder is a matter of very definite economic importance. Not long since a patient died who had been a resident of this hospital for forty-two years. During this time he cost the province not less than \$6000.00, exclusive of the interest which this outlay might have accumulated. Had it been possible to cure this man, he would doubtless have been a valuable member of the community rather than a charge upon the province. And this is but one instance out of many. It follows, therefore, that from an economic point of view, even if there was no higher motive, it is of great importance to provide our hospital with every facility for promoting the cure of those unfortunate people who come to us for aid.

Something less than forty-five per cent. of the 3575 patients who have been treated in this hospital since its inception were cured. The rest were not cured. It is impossible to fully realize the awfulness of this fact. Doubtless many out of this huge percentage died early in the course of the disease, and many of those who became chronically insane were of a degenerate or imperfectly developed type and were consequently beyond the reach of human skill. But many more must have been of the class which disappoint the brightest hopes of those who devote themselves to the care of the mentally alienated—patients whose cases have seemed at first most favourable for cure, but who yet did not recover.

— It cannot be positively stated what causes contributed to such a very unfortunate result, but I am convinced that among these causes is the defective equipment of our hospital.

In this respect we are not singular. In fact I feel assured that, as hospitals for the insane go, our institution ranks fairly well. My contentions, therefore, are not of merely local application, but it must not be overlooked that they *do* apply locally as well as generally. Hospitals for the insane as a class, some of the more expensive private institutions being excepted, are almost universally undermanned, especially in the nursing staff. When so much depends upon the attention which can be devoted by the intelligent nurse to the patient, what is to be expected from the amount of attention possible to give to each individual when each nurse must attend upon an average of twelve patients, and look to the house-keeping of the ward as well? When the mental condition of the patient is such as to demand every possible method of diversion, what is to be expected from the care of an institution which is almost totally devoid of workshops, recreation rooms, or any other facility for distracting the attention of the patient from his morbid self or directing his overplus of energy into healthy and reasonable channels? When the question of medical treatment is almost wholly a question of nutrition, what is to be expected of the institution hampered by traditions and required to follow as closely as possible a set bill-of-fare? And yet the condition of perhaps the



majority of hospitals for the insane is to-day such that marked defect in these particulars may easily be determined. Such, at any rate, is the condition of our hospital.

I sincerely trust that I am not over-confident when I express my belief that it but requires the direction of attention to the condition of affairs now existing, in order that there may be instituted such reforms as to lead to a speedy realization of my hope that our present disabilities will soon be memories only. I quite realize that the needs of the insane of our province appeal to me much more strongly than they are likely to appeal to those who are not brought so closely into contact with them. Yet I trust that my plea may not prove altogether ineffective, and that from year to year, our facilities may be improved upon to as great an extent as is possible.

Among our greatest present needs are an increase in the number of the nursing staff, increased accommodation, workshops for the employment of our patients, a suitable building for recreation and gymnastics, and an infirmary building to which could be removed ill and feeble patients who require special care. A reception building is also very much desired, as I am convinced that the introduction of a new patient to a ward full of insane people, many of whom may be of objectionable habits, many chronically alienated, and many hopelessly insane, is likely to have a harmful effect. Some years ago (in his report for year ending September 30, 1894) my predecessor, Dr. Sinclair, urged the advisability of erecting such a building, in terms with which I heartily accord:

"No matter how incurable a case may be, if it is not quiet and harmless (?) it must be kept here. The result is easy to see. Our wards will become filled with violent, destructive, and unclean incurables. Our single rooms are now all occupied, and we are obliged to put into associate rooms patients unfit to be with others. As a consequence, quarrels and fights occur at night, and we are in perpetual dread of a tragedy. The influence also of this class upon new cases is very prejudicial. Harm is unquestionably done by the association, and curable cases run the risk of being made incurable. Is such a state of things fair to recent cases? Every superintendent knows how much injury is done new patients by being obliged to associate with certain kinds of chronic lunatics who seem to delight in encouraging the recent admission in his delusions, and in telling him how long so and so has been here, and how, probably, his fate will be the same.

\* \* \* \*

"It may be asked, why should association between the recent and incurable cases be permitted? Why not keep them apart? This is easier said than done. We do try; but in a house constructed as this is absolute separation of one class or of individuals of the same class, is impossible. The wards communicate, the grounds are almost

common property, and chance meetings constantly occur. The only way in which perfect isolation can be carried out is by means of annexes for recent cases and for convalescents of each sex.

\* \* \* \* \*

"Here we have an excellent home for our incurables, but we are not able to do the acute cases full justice. What we need for this class is, as I said, an annex building, simple in design and construction, to do away as far as possible with the Institutional feeling, furnished so as to give a home-like look, and so take away all ideas of restraint and confinement. It would perhaps be better to have no wards, with their monotonous and often dreary corridors, but instead, plainly furnished single rooms, with sitting rooms; thus permitting privacy and, at the same time, opportunities for social intercourse when such was desirable.

\* \* \* \* \*

"Such a building should be provided with every known therapeutic agency—electricity, massage, gymnastics, hydrotherapy, and all the means necessary for a thorough examination of the blood and various excretions, for the use of the microscope, sphygmograph, ophthalmoscope, together with very thorough physical examinations. Here the real medical work should be done, and no labor or expense be spared which would in any way tend to aid the recovery of the patient, or help to solve the unknown problems of insanity."

In my last report I suggested a method of increasing the number of single rooms without extending the building. Since that time, in the men's wards, we have had to sacrifice three of the already too few single rooms to provide accommodation for water closets, so that with the increased number of patients, we are often at our wits end to know how to dispose of all our quarrelsome and dangerous patients at night. The need for more single rooms is therefore more urgent than ever before, and grave risk of tragedy will be incurred if some action is not at once taken to provide us with a number of single apartments. The method suggested in my last report was not expected to afford more than temporary relief, and the increase in our population since that time is such that even now it would need modification in order to prove sufficient.

Two means might be suggested to meet, at comparatively small expense, the demand for more space. One is to erect a building in a suitable position, which could be used as an associate dining-room for wards M. 1, M. 2, M. 6, M. 7, M. 8, F. 1, F. 2, F. 5, F. 6 and F. 8. This would permit us to convert the present dining-rooms of these several wards into sleeping apartments, and, while imposing upon us certain disadvantages which attach to the associate dining-room system, would also eliminate certain faults connected with our present system, would allow the meals to be served in a more comfortable manner, and would lessen the proportion of waste. If such a building were to be made two stories in height, the upper story would provide a recreation room, where we could hold our assemblies and entertainments.

The second means I would suggest is to provide separate buildings for the nursing staff—one for each sex. On the men's side, six single and five double rooms, and on the women's side ten single, one double, and two three-bedded rooms, are occupied by the members of the nursing staff. These would be available for the accommodation of patients if other quarters could be secured for the nurses. The complete separation of the nursing staff from the wards at night would necessitate an increase in the staff of our night nurses, but would ensure our day staff better rest than they now get, and would otherwise add to their comfort.

Unless some such means be adopted, the erection of new wings, or, much better, detached blocks, must be considered. To allow the present state of affairs to continue, even if they did not tend to grow worse, would be but to court disaster, for the danger of serious quarrels in our wards at night is now really very great.

Other needs, not so pressing as those to which I have referred but nevertheless needs which should be considered and kept in view, are a proper storeroom, a new bakery and a larger and more conveniently arranged kitchen. Our present kitchen is too small, and is situated in the building in which a number of our staff have their quarters. In the summer the heat reaching these quarters from the kitchen is so great as to cause the occupants much discomfort. I would much like to see a suitable building erected for kitchen and bakery. This should be quite separate and detached from any existing building. If such a building were to be erected the present kitchen could be very easily converted into a convenient and comfortable store-room.

#### FINANCIAL.

I freely admit that such changes as I would like to see made in our hospital would lead to a large expenditure of money. I feel bound, however, to practice at all times as strict an economy as is possible without risking regression rather than progress. Our expenditure during the year just ending is proof of this. We have very slightly exceeded our estimate, having expended \$65,070.79 instead of \$65,000.00 as estimated. We over-ran the expenditure of the preceding year by about \$3000. Several matters contributed to this increase in expenditure. In the first place nearly all supplies—food, fuel, clothing, etc.—were considerably more expensive than in the preceding year. Secondly, we made certain improvements in our premises and effected certain extensive repairs which we feel were in the interest of economy. In addition to the sum of \$4066.37 charged to extraordinary expenditure, permanent repairs costing fully \$1000 were accomplished, which might well have been charged to extraordinary expenditure but which have been classed in our financial tables as ordinary repairs. And finally we have had a much larger number of patients under treat-

ment in the year just ending than in the previous year. There is quite sufficient reason, therefore, for our increased expenditure.

When, however, we come to consider the per capita cost, it is found that this was really lower than the year before by \$7.30. For the year just ending it was \$171.46, while for the year ending September 30, 1899, it was \$178.76.

And, moreover, we are able to set against our increased total expenditure an increase in revenue over 1898-9 of \$3273.54. Our revenue for the year just ending exceeded the estimate by \$2033.14.

In making these statements, however, I should call attention to the fact that our per capita cost must always vary inversely with the population of the hospital, while the income will vary directly with the population. It should be noted, also, that we have no capital account, and that our total expenditure is charged against maintenance, despite the fact that large sums may be chargeable to construction or permanent repairs. It must therefore be expected that the per capita cost will vary from year to year in direct ratio to the amount of construction work accomplished, and in inverse ratio to the number of patients resident.

#### IMPROVEMENTS.

The last annual report recorded the erection of a new barn and a new piggery. These structures were hardly complete when the report was prepared, but have since been finished and have proved very comfortable and convenient. The old barn was moved across the road and attached to the new piggery, where it continues to provide shelter for our cows during the warmer months.

The various outbuildings originally situated directly to the rear of the hospital have all been moved to a more suitable position some distance south of their original sites. This gives us a large clear space which I hope to be able to convert into a recreation ground for the male patients.

The removal of the different buildings necessitated more or less extensive repairs to each. The carriage house has been provided with new sills, refloored, and has had some other repairs effected. The cart-shed has also had new sills put in place and such other repairs made as were necessary. The carpenter shop will need some very extensive repairs, which will be proceeded with as opportunity offers.

The stove-room wing to the laundry has been completed and has proved very satisfactory, not only in adding to the comfort of those engaged at work in the ironing-room, but also in lessening the danger from fire.

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The work of wiring the hospital for electric light was completed very soon after the last report was written, and since its completion the several buildings have been lighted by electricity. The service has proved very efficient, and is in every way preferable to the gas upon which we were formerly dependent.

A large amount of grading has been done on the grounds to the rear of the hospital, and a considerable area of new land at the back of the farm has been broken up.

I am particularly grateful for the prompt action which followed my recommendation for new plumbing in my last report. A substantial beginning has been made towards the equipment of the men's wards with a thoroughly modern sanitary service, and I am hopeful that in my next report I may be able to state that the whole hospital has been fitted with plumbing which is in every respect up to date. The old plumbing in the section now being refitted had really become a serious menace to the health of the house, and that which is still untouched is but little better.

A trench was constructed along the western shore of Lake Maynard, to prevent the dangerous surface drainage of that side of the lake from gaining access to and contaminating our water supply.

The halls of ward M 2 and M 6 were painted afresh, as was the woodwork in the hall of ward M 8. In addition to this a large number of bed room floors and the walls of several bed rooms were painted.

The whole east wall of the main building from the centre section southward was stripped of mastic, repointed, oiled and painted. This proved to be a very large piece of work, as nearly 1800 square yards of surface was treated. The result has been to greatly improve the appearance of the part of the building thus repaired, and to stop several leaks in the wall which had formerly proved impossible to stop.

The south end of the detached building was also repointed.

The wharf was recovered with three inch planking, a new cover was laid on the "bridge," a new floor was laid in the entry to the detached building, and a new plank walk was laid between the main building and the detached building.

A number of changes were made in the steam plant, which, while costing but little, have tended to effect a considerable saving in steam and fuel.

In addition to these a number of smaller changes were made, all, I think, in the line of improvement.

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### TRAINING SCHOOL FOR NURSES.

Another very successful year in the training school was terminated by public closing exercises on the nineteenth of June. At these exercises eight graduates, two of them men, received the diploma of the school. The prizes were presented by His Honor, Sir Malachy B. Daly Lieutenant-Governor. The DeWolf medal, for best examinations during whole course, was won by Miss Irene Settle. The Commissioner's prize, for best examinations in the subjects of the senior year, was won by Miss Elsie McHeffey, who also won the staff prize for best examinations in medical nursing. The staff prize for best examinations in the practical work of nursing was won by Miss Lida Meadows, and that for best examinations in surgical nursing was won by Mr Archibald McKeigan.

In the junior year, Dr. Sinclair's prize, for best examinations was won by Miss Mary McManus, and the second prize (Dr. Moore's) was won by Miss Violet Snook.

The institution of the training school has done a great deal towards bettering the condition of our patients and improving their prospects of recovery. The pupils of the school have devoted themselves to their trying and difficult work with a degree of enthusiasm and unselfishness which is deserving of the highest praise and commendation.

The improvement which trained nursing has wrought in our women's wards has encouraged us to extend the course to our male attendants also, and they are now expected to take the full course in nursing. We are hopeful that the added interest which a knowledge of the principles of nursing gives to those who have the care of the ill, may increase the efficiency of the attendance upon our male patients, and accomplish in our men's wards a result comparable to that which has been accomplished in our women's wards.

It is gratifying to be able to state that many graduates of our training school have won laurels in various places, and that a number are occupying positions of trust in this and other institutions for the insane. It should be generally known that our teaching is not confined to the nursing of the insane, but that we give instruction in general nursing. Our wards are never free from cases of illness, and we frequently have occasion to perform surgical operations, so that our pupils have opportunity for putting their knowledge of nursing into practice. And by courtesy of Commissioner Butler and Superintendent Dow, of the City Alms House, we have effected an arrangement by which our female pupil nurses are able to receive practical instruction in obstetric nursing in the lying-in wards of that institution.

Didactic instruction is given by the members of the medical staff while the practical instruction in bed-making, poultice-making, bandaging, etc., is given by Miss Sampson, to whose earnest efforts is due much of the success of our school.

For the next session, the usual prizes are offered.

We use the following text books:—

#### JUNIOR YEAR.

- "Our bodies and how we live."
- "Hand book for attendants."
- "Harding on mental nursing."
- "St. John Ambulance Association book on nursing."
- "A text-book for nurses," (Wise) 1st part.

#### SENIOR YEAR.

- "How to care for the Insane," (Granger.)
- "Nursing Handbook," (Weeks Shaw.)
- "Nursing Handbook," (Humphries.)
- "A Text Book for nurses," (Wise.) 2nd part.

#### REFERENCE.\*

- Practical points on nursing, (Stoney.)
- Surgical Handicraft, (Pye.)
- Emergencies, (Dulles.)
- Massage. (Ostrom.)
- Fever Nursing, (Wilson.)
- Notes on Nursing, (Nightingale.)
- Notes on Surgical Nursing, (Bell.)
- Manual for Monthly Nurses, (Cullingworth.)
- A primer of Psychology and Mental Disease, (Burr.)

The following is a list of the graduates of our school:—

1894.

Harriet Sampson. Elizabeth Ogilvie.

1895.

Margaret Meagher. Mary B. McDonald.  
Ellen S. McDonald. Ella A. Isnor.  
Carrie Lawson.

1896.

Mary Murchy. Maggie Etter.  
Effie D. Foster. Minnie C. Langille.  
Laura B. Parrot. Delilah Rudolph.  
Ellen M. Allen. Helena Hooper.  
Euphemia Carmichael.

\*Need not be purchased; can be borrowed from the Hospital Library.

1897.

Mary Mackey.	Carrie Purcell.
Ida Munro.	Mattie Thompson.

1898.

Mary T. Joy.	Nettie Werner.
Ida Branney.	Alice Christian.

1899.

Annie C. Cleveland.	Ella M. Kennedy.
Lilian C. Matthews.	Mary E. Lyons.
Lelia Ettinger.	

1900.

Irene Settle.	Rachel Merson.
Elsie McHeffey.	Alex. F. Nicholson.
Lida Meadows.	Alex. R. Graham.
Mary Parrot.	Archibald McKeigan.
Thomas Christian.	

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#### ACKNOWLEDGMENTS.

Except during the warmer months, we arranged some form of entertainment for our patients every week. Once a fortnight this took the form of a dance, which is a time-honored institution here, and is always much enjoyed. In the intervening weeks we had musical entertainments, amateur theatricals, lantern exhibitions, etc. Many of these were prepared and performed by members of the staff of the hospital, who willingly and ungrudgingly sacrificed a large share of the little spare time which our long duty hours allow them, to assist in making hospital life less monotonous and more bearable for our patients. But we are under obligation to several parties of good friends for a number of very enjoyable entertainments.

Those to whom we are thus indebted are as follows:

Academy of Music Orchestra (two concerts).  
 Mr J. A. McDonald and party.  
 Harmonic Quartette, assisted by Mrs. Burgoyne and Miss Shute.  
 Mrs. Edmund A. Smith and party.  
 Amity Lodge Orchestra.  
 St Mary's Dramatic Club.  
 Y. M. C. A. Dramatic Class.  
 St. Patrick's Dramatic Club.  
 O'Leary's Minstrels.



The following clergymen of various denominations have through the year conducted services, have visited those who were ill, and buried those who have died: Rev. Messrs. Stewart Kempton, Ryan, and Rev. Father Underwood, P. P., of Dartmouth; Rev. Messrs. Almon, Bullock, Webster, Chute, Gandier, McMillan, McKay, Fowler, Dobson, Rennie and Donaldson, of Halifax. We desire to tender them our thanks.

Our patients, or at least many of them, continue to take interest in what is occurring in the outside world. The newspaper, therefore, is a welcome visitor. To the proprietors of the following, which are regularly received, we acknowledge our indebtedness:

- "Chronicle" and "Herald" (daily).
- "Acadian Recorder" (tri-weekly).
- "Acadian," Wolfville.
- "Messenger and Visitor," St. John, N. B.
- "Presbyterian Witness."
- "Colechester Sun," Truro (tri-weekly).
- "News," Truro.
- "Eastern Chronicle," New Glasgow.
- "Saturday Bulletin," New Glasgow.
- "Forward," Windsor.
- "Progress and Enterprise," Lunenburg.
- "Tribune," Windsor.
- "Herald," North Sydney.
- "Atlantic Weekly," Dartmouth.
- "Parrsboro Leader."

From the offices of the "Morning Chronicle" and the "Maritime Merchant," we get almost daily large bundles of their exchanges. From the Dartmouth reading room we also get large bundles of papers frequently, and for contributions of magazines we are indebted to Rev. Mr. Stewart, Mrs. R. McConnell, Mrs. W. E. McLellan, Mrs. E. L. Thorne and Mrs. A. E. Lawlor.

Through the kind courtesy of Hon. Mr. Longley, President of the Exhibition Commission, a party of about fifty of our patients were enabled to visit the exhibition and to inspect its various features. It is needless to say that the outing was very much enjoyed.

Prof. Howard Murray and Mrs. E. L. Thorne have placed us under obligation by large contributions of books for the patients' library.

Miss Polson sent, on two occasions, bundles of handkerchiefs for distribution among the women patients.

The British American Book and Tract Society continues to send us parcels of the Society's publications.

We are under obligations to several members of the choir of St. Peter's Church, who assist in the singing at the Catholic services.

Miss Adams continues to preside at the organ at the protestant services, and Miss Doyle at the catholic services.

We again had a Christmas entertainment, and the response from the friends and relatives of patients to our circular, asking for contributions to the tree, was so hearty that two large trees were laden with gifts for all whose condition permitted them to be present. The gift of a dozen pipes by Mr. W. Sarre, made happy a dozen of our male patients, who find in "the weed" an antidote for dull care.

It is a pleasure for me to again have the opportunity to express my appreciation of the loyal support accorded me by all associated with me in the workings of the hospital. Drs. Mackenzie and Moore have been most faithful and diligent, and have always shewn themselves to be actuated by a full realization of the responsibilities and possibilities of their positions. I regret that we are soon to lose Dr. Moore, who has decided to enter into private practice. He has been a very valuable member of our staff, and will take with him to his new field for usefulness the kindest wishes of all our household. I am indebted to Mr. Hunt for advice and assistance in the financial administration of the hospital, which I value highly. To all other members of the staff, to nurses and attendants and to the employees of all the departments I owe much. They have all served the hospital faithfully and well, and have always evinced a commendable willingness to do all in their power to further the best interests of the hospital.

In his capacity of Inspector, we have had several visits from Dr. Sinclair, whose interest in our hospital continues keen. He is always a welcome visitor, and I must again express my indebtedness to him for the sympathy he has shewn in the work of our hospital and for the advice he has freely given.

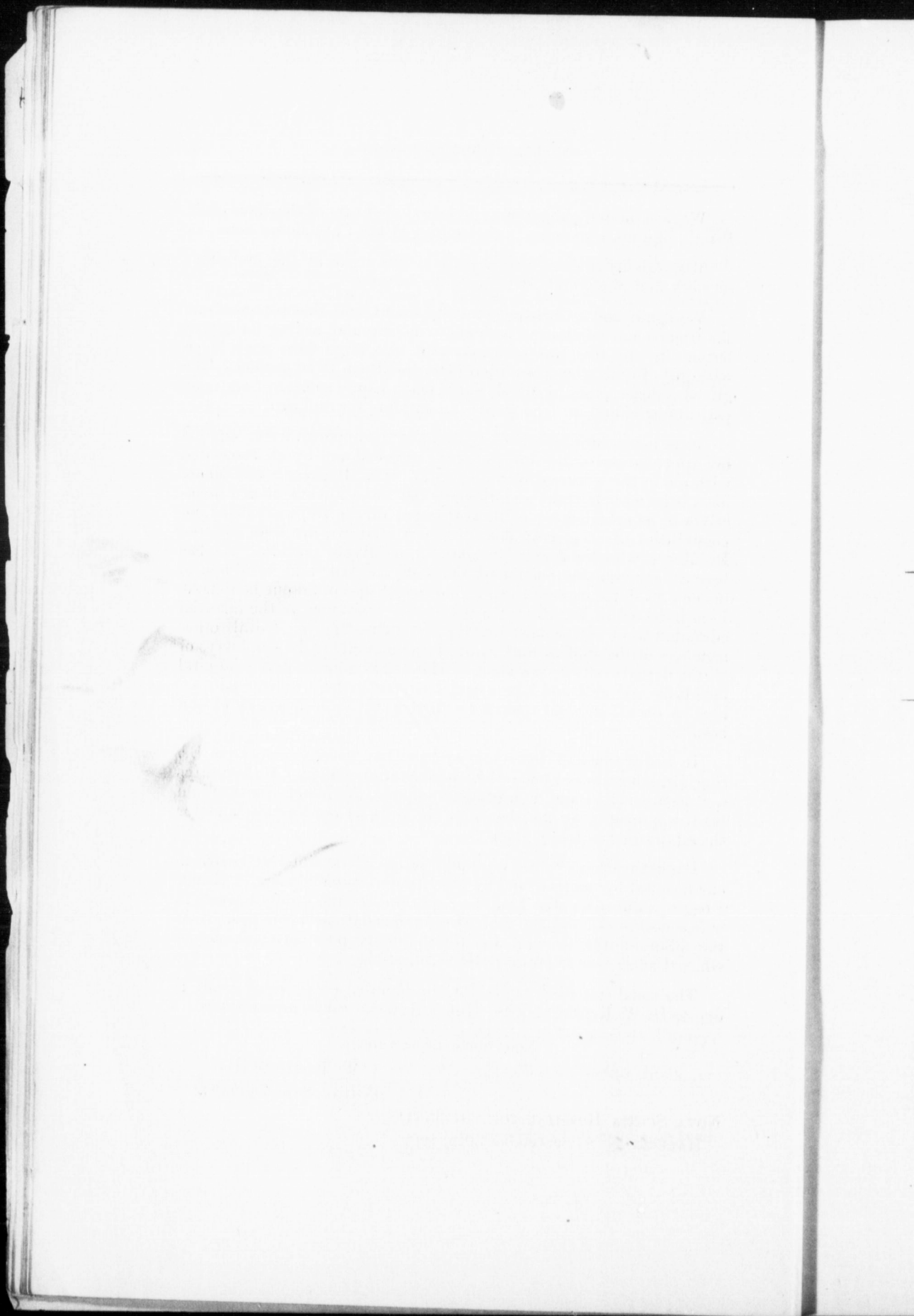
I must further express my appreciation of the interest shewn in our hospital by yourself, and by the Deputy Commissioner, Dr. Gilpin. I beg to assure you that I am very grateful for the kindly manner in which was considered the various recommendations made relative to the affairs of the hospital, and for the many personal courtesies, of which I shall ever retain pleasant recollections.

The usual statistical tables, for the compilation of which credit is due to Dr. McKenzie, and Mr. Hunt's financial tables are appended.

Your obedient servant,

W. H. HATTIE,  
*Medical Superintendent.*

NOVA SCOTIA HOSPITAL FOR THE INSANE,  
HALIFAX; N. S., September 30th, 1900.



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STATISTICAL TABLES.

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TABLE I.

Showing the ...

**TABLE I.**  
*Showing the Admissions, Re-admissions, Discharges and Deaths from Oct. 1st, 1899, to Sept. 30th, 1900.*

	M.			F.			T.			MALES.	FEMALES.	TOTAL.
In Hospital 1st October, 1899.....										189	187	376
Admitted for the first time during the year.....	43	59	102									
Re-admitted during the year.....	15	10	25									
Total admitted.....										58	69	127
Total under care during the year.....										247	256	503
DISCHARGED OR REMOVED.												
Recovered.....	24	27	51									
Relieved.....	10	9	19									
Not improved.....	3	3	6									
Died.....	12	14	26									
Total discharged and died during the year.....										49	53	102
Remaining in Hospital Sept. 30th, 1900.....										198	203	401
Average number resident during the year.....										197.8	202.4	400.2

**TABLE II.**  
*Showing the Admissions, Re-admissions and Deaths, from the opening of the Hospital to the present date, September 30th, 1900.*

	MALES.			FEMALES.			TOTAL.	
	M.	F.	T.	M.	F.	T.		
Persons admitted during the period of forty-two years								
Re-admissions				1411	281		2973	
Total of cases admitted				1562	321		602	
DISCHARGED OR REMOVED.								
Recovered	842	762	1604					
Relieved	341	293	634					
Not improved	85	62	147					
Died	414	372	786					
Not insane	3		3					
Remaining September 30th, 1900				1685	1489		3174	
SUMMARY OF TOTAL ADMISSIONS 1859 TO 1900.								
	MALES.			FEMALES.			BOTH SEXES.	
Percentage of Cases Recovered	44.7	45.1		44.9				
" " Relieved	18.2	17.4		17.8				
" " Not improved	4.5	3.7		4.1				
" " Died	22.	21.9		21.95				
" " Remaining	10.5	11.9		11.2				
" " Not insane	.1			.05				
Total	100.0	100.0		100.0			100.0	

Mass Annual Morbidity and Proportion of Recoveries, per cent. of

"				
"	Remaining	10.5	11.9	21.35
"	Not insane	.1	.....	11.2
Total		100.0	100.0	100.0

18  
*Mass Annual Mortality and Duration of Recoveries, per cent. of*

P.



TABLE III.—Showing Admissions, Re-Admissions, Discharges and Deaths, with the Mean Annual Mortality and Proportion of Recoveries, per cent. of Admissions for each Year since the opening of the Hospital.

YEAR.	ADMITTED.			DISCHARGED.						Remaining at completion of each year.			Average number resident.			Percentage of Recoveries on Admission.			Percentage of Deaths on average No. resident.														
	Recovered.			Relieved.			Not improved.			Died.			M.			F.			T.			M.			F.			T.					
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.			
1859	39	31	70	8	3	11	2	1	0	0	0	0	0	0	0	0	0	0	28	27	55	21	21	42	20.5	9.7	15.7	0	0	0	8.8	2.8	5.8
1860	32	31	63	8	6	14	2	0	1	3	0	0	0	0	0	0	0	0	45	50	95	34	36	70	25.0	19.3	22.2	8.8	2.8	5.8	5.0	1.4	9.5
1861	38	22	60	14	9	23	4	1	3	0	0	0	0	0	0	0	0	0	62	55	117	55	50	105	30.8	40.9	38.3	5.0	1.4	9.5	5.8	1.9	3.9
1862	31	12	43	12	9	21	1	1	2	0	0	0	0	0	0	0	0	0	74	56	130	69	52	121	18.7	75.0	48.8	7.1	1.0	4.0	7.1	1.0	4.0
1863	30	17	47	17	5	22	6	0	0	0	0	0	0	0	0	0	0	0	75	67	142	70	62	132	56.7	29.4	46.8	7.1	1.0	4.0	5.0	8.4	6.7
1864	23	23	46	8	10	18	1	2	3	0	0	0	0	0	0	0	0	0	82	72	154	80	71	151	50.0	72.7	60.9	11.1	6.6	9.0	11.1	6.6	9.0
1865	24	22	46	12	16	28	5	2	1	0	0	0	0	0	0	0	0	0	79	71	150	81	74	155	47.6	33.3	40.5	4.6	1.2	2.9	4.6	1.2	2.9
1866	21	21	42	10	7	17	6	4	1	0	0	0	0	0	0	0	0	0	80	77	157	91	75	166	48.0	39.0	44.0	4.6	1.2	2.9	4.6	1.2	2.9
1867	25	18	43	12	7	19	1	4	1	1	1	2	2	0	0	0	0	0	87	82	169	86	81	167	20.0	26.0	23.2	6.0	8.7	7.3	5.8	5.2	5.5
1868	40	46	86	8	12	20	1	2	4	0	0	0	0	0	0	0	0	0	111	105	216	99	97	196	53.6	29.0	41.8	5.8	5.2	5.5	10.5	8.6	9.6
1869	41	38	79	22	11	33	2	2	6	13	11	25	8	28	12	24	24	121	124	245	120	114	234	26.7	44.4	34.2	10.5	8.6	9.6	15.5	6.5	11.0	
1870	43	27	70	12	12	24	3	2	5	1	0	0	0	0	0	0	0	134	126	260	133	128	261	67.6	56.2	62.1	15.5	6.5	11.0	10.4	10.5	10.4	
1871	34	32	66	23	18	41	3	2	2	0	0	0	0	0	0	0	0	122	130	252	129	131	260	45.5	57.6	50.6	10.4	10.5	10.4	8.5	4.3	6.4	
1872	44	33	77	20	19	39	3	1	4	0	0	0	0	0	0	0	0	128	140	268	128	138	266	66.5	52.6	59.4	8.5	4.3	6.4	7.5	2.7	5.0	
1873	36	38	74	24	20	44	3	3	1	4	0	0	0	0	0	0	0	129	150	279	133	145	278	50.0	57.5	53.7	7.5	2.7	5.0	8.3	7.7	8.0	
1874	34	33	67	17	19	36	6	0	6	0	0	0	0	0	0	0	0	156	162	318	144	156	300	32.4	45.6	37.7	8.3	7.7	8.0	7.4	4.7	6.0	
1875	68	46	114	22	21	43	6	1	7	1	0	1	12	12	24	24	24	164	173	337	162	169	331	51.1	48.9	50.0	7.4	4.7	6.0	8.2	6.2	7.2	
1876	45	43	88	23	21	44	2	3	5	0	0	0	0	0	0	0	0	173	178	351	171	176	341	47.1	55.8	51.0	8.2	6.2	7.2	7.3	1.9	4.6	
1877	51	43	94	24	24	48	4	3	7	0	0	0	0	0	0	0	0	183	179	362	178	183	361	42.5	74.3	55.9	7.3	1.9	4.6	6.3	9.4	4.7	
1878	54	39	93	23	29	52	5	10	3	1	4	13	3	16	13	13	176	188	364	183	187	370	47.7	48.8	48.3	6.9	4.2	5.6	10.8	4.5	7.7		
1879	36	38	74	23	17	40	9	4	6	9	4	13	4	20	12	8	172	189	361	176	192	368	27.0	44.1	36.2	10.8	4.5	7.7	39.2	50.0	45.0		
1880	44	45	89	21	22	43	14	14	28	1	0	0	0	0	0	0	178	204	382	176	200	376	39.2	50.0	45.0	5.5	6.1	5.8	5.2	2.3	3.8		
1881	37	43	80	10	19	29	2	0	2	0	0	0	0	0	0	0	194	205	399	187	212	399	52.0	56.0	54.0	5.2	2.3	3.8	74.3	42.7	56.9		
1882	51	40	91	20	20	41	2	6	8	0	0	0	0	0	0	0	193	207	400	189	211	400	44.3	42.7	56.9	4.7	3.7	4.2	35.7	52.3	41.9		
1883	50	46	96	2	26	52	14	13	27	0	0	0	0	0	0	0	178	206	384	190	214	404	35.8	36.8	33.9	2.8	7.2	4.9	6.8	7.4	7.1		
1884	39	47	86	29	20	49	15	20	35	1	0	1	9	8	17	18	198	198	396	206	216	422	50.8	43.8	47.3	6.8	7.4	7.1	38.3	36.8	33.9		
1885	70	42	112	25	22	47	1	4	5	1	1	2	14	16	30	19	198	198	396	206	216	422	50.8	43.8	47.3	6.8	7.4	7.1	36.8	53.1	44.2		
1886	57	57	114	29	25	54	23	22	45	0	8	8	14	16	30	21	214	193	407	211	194	405	38.3	36.8	33.9	2.8	7.2	4.9	36.8	53.1	44.2		
1887	68	44	112	24	14	38	21	15	36	1	6	7	6	14	20	11	206	189	395	213	198	411	50.0	43.7	47.3	6.2	9.4	7.8	50.0	43.7	47.3		
1888	57	47	104	21	25	46	22	15	37	2	0	0	2	13	18	31	194	178	372	206	189	395	51.7	52.7	52.1	4.3	5.1	4.7	51.7	52.7	52.1		
1889	44	32	76	22	14	36	19	11	30	2	0	0	2	15	9	24	185	163	348	192	174	366	52.6	37.1	44.5	5.1	7.7	6.4	52.6	37.1	44.5		
1890	58	36	94	30	19	49	11	12	23	15	9	24	1	3	10	24	184	170	354	194	180	374	51.7	52.7	52.1	4.3	5.1	4.7	51.7	52.7	52.1		
1891	57	54	111	23	20	49	17	12	29	2	1	3	5	12	8	21	181	182	363	189	184	373	50.0	35.1	41.5	4.2	7.1	5.7	50.0	35.1	41.5		
1892	44	57	101	22	20	42	10	7	17	7	0	1	3	5	10	17	178	176	354	188	188	376	51.2	52.0	51.6	3.7	5.3	4.5	51.2	52.0	51.6		
1893 (9mos.)	43	50	93	22	26	48	16	16	32	1	4	5	1	10	10	21	185	186	371	185	187	372	43.4	37.5	40.4	4.4	7.8	6.1	53.2	50.0	51.5		
1894-5	47	48	95	25	21	49	16	15	35	1	0	1	1	10	10	22	171	167	338	181	178	359	53.2	50.0	51.5	4.4	7.8	6.1	53.2	50.0	51.5		
1895-6	63	67	130	25	21	46	11	14	25	7	2	9	2	8	14	22	176	187	363	180	187	367	59.6	31.3	35.4	7.7	5.3	6.5	61.5	73.3	67.4		
1896-7	52	45	97	31	33	64	18	15	33	5	3	8	7	14	21	166	167	333	174.7	179.8	354.6	177.6	179.8	354.6	61.5	73.3	67.4	4.0	7.8	5.9	61.5	73.3	67.4
1897-8	54	60	114	20	23	43	5	8	13	1	0	2	1	2	17	182	178	360	179.3	177.6	356.9	177.6	179.8	356.9	37.3	38.3	37.7	6.6	9.5	8.1	37.3	38.3	37.7
1898-9	48	54	102	21	26	47	8	5	13	0	0	1	0	12	14	26	189	187	376	184.2	178.6	362.8	43.7	48.1	45.9	6.4	8.9	7.6	43.7	48.1	45.9		
1899-1900	58	69	127	24	27	51	10	9	19	3	3	6	6	12	14	26	198	203	401	197.8	202.4	400.2	41.4	39.1	40.2	41.4	39.1	40.2	6.0	6.9	6.4		
1883	1692	3575	842	762	1604	341	293	634	85	62	147	414	372	786	Mean of forty-two years.	44.8	45.7	45.3	6.5	5.7	6.1												

TABLE IV.—Showing the History of the Annual Admissions since the opening of the Hospital, with the



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Show

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*Disease*

Apo  
Epi  
Pare  
Loco  
Exh

Phre  
Acut  
Mult

*Disease*

Infla  
Infla  
Pulm  
Abse

*Disease*

Orga  
Aneu  
Gang

*Diseases*

Perito  
Enter  
Diarr  
Gastr  
Hepat  
Hepat  
Chron  
Acute  
Psoas  
Diabet

*Specific*

Pemph  
Acute  
Septic  
Erysip  
Enteric  
Cancer  
Acute

*General*

Genera  
Homici  
Suicide  
Acciden

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To

TABLE V.

Showing the Causes of Death, from the opening of the Hospital to the present date, September 30th, 1900.

CAUSES OF DEATH.	1860 TO 1899		1900.		TOTAL.	
	M.	F.	M.	F.	M.	F.
<i>Diseases of Nervous System :</i>						
Apoplexy and Paralysis.....	37	28	..	1	27	29
Epilepsy .....	24	13	1	..	25	13
Paretic Dementia .....	67	7	..	..	67	7
Locomotor Ataxia.....	4	..	..	..	4	..
Exhaustion from Chronic Mania and Melancholia.....	25	39	4	2	29	41
Phrenitis and Abscess of the Brain .....	3	..	..	..	3	..
Acute Meningitis .....	1	1	..	..	1	1
Multiple Sclerosis .....	..	1	..	..	..	1
<i>Diseases of Respiratory System :</i>						
Inflammation of the Lungs .....	16	12	..	2	16	14
Inflammation of Bronchi (Influenza) ...	2	3	..	..	2	3
Pulmonary Tuberculosis .....	91	135	5	3	96	138
Abscess and Gangrene of Lung .....	4	3	..	..	4	3
<i>Diseases of Circulatory System :</i>						
Organic Disease of Heart .....	19	5	1	..	20	5
Aneurism .....	3	1	..	..	3	1
Gangrene of Extremities .....	..	1	..	..	..	1
<i>Diseases of Abdominal Viscera :</i>						
Peritonitis .....	6	4	..	1	6	5
Enteritis .....	3	..	..	..	3	..
Diarrhœa and Dysentery .....	8	16	..	3	8	19
Gastric Ulcer .....	2	1	..	..	2	1
Hepatic Cirrhosis .....	2	3	..	..	2	3
Hepatic Abscess .....	..	1	..	..	..	1
Chronic Nephritis .....	9	6	..	..	9	6
Acute Cystitis .....	1	..	..	..	1	..
Psoas Abscess .....	1	..	..	..	1	..
Diabetes .....	..	1	..	..	..	1
<i>Specific Diseases :</i>						
Pemphigus Vulgaris.....	..	..	..	1	..	1
Acute Delirium.....	12	9	..	..	12	9
Septicæmia .....	..	..	..	1	..	1
Erysipelas .....	2	8	..	..	2	8
Enteric Fever .....	1	7	1	..	2	7
Cancer .....	4	4	..	..	4	4
Acute Osteomyelitis .....	1	..	..	..	1	..
<i>General Causes of Death :</i>						
General Debility and Old Age.....	43	42	..	..	43	42
Homicide .....	1	..	..	..	1	..
Suicide .....	8	6	..	..	8	6
Accident .....	2	1	..	..	2	1
Total.....	402	358	12	14	414	372



Females.....	11	9	8	10	10	281	194	19	14	45	5	2	2
Total.....	23	16	18	19	25	602	433	36	31	89	8	3	2

**TABLE VII.**  
*Showing the Age of Admissions, Discharges and Deaths, from Oct. 1st, 1899 to Sept. 30th, 1900.*

AGES.	THE ADMISSIONS.			THE DISCHARGES.						THE DEATHS.			
	M.	F.	T.	Recovered.			Removed, Relieved or otherwise.			M.	F.	T.	
				M.	F.	T.	M.	F.	T.				
From 15 to 20 years.....	7	5	12	2	2	4	.....	.....	.....	.....	.....	.....	.....
" 21 to 30 "	17	17	34	10	8	18	3	3	6	.....	.....	.....	2
" 31 to 40 "	14	14	28	5	8	13	4	3	7	.....	.....	.....	1
" 41 to 50 "	12	16	28	4	4	8	4	.....	4	.....	.....	.....	3
" 51 to 60 "	6	9	15	3	4	7	.....	6	6	.....	.....	.....	2
" 61 to 70 "	1	6	7	.....	1	1	2	.....	2	.....	.....	.....	3
" 71 to 80 "	1	2	3	.....	.....	.....	.....	.....	.....	.....	.....	.....	.....
Total .....	58	69	127	24	27	51	13	12	25	12	14	26	

**TABLE VIII**  
*Condition as to Marriage in the Admissions, Discharges and Deaths, from October 1st, 1899, to September 30th, 1900.*

	THE ADMISSIONS.			THE DISCHARGES.						THE DEATHS.		
	Recovered.			Removed, Relieved or otherwise.								
	M.	F.	T.	M.	F.	T.	M.	F.	T.	M.	F.	T.
Single .....	34	26	60	15	16	31	10	8	18	3	6	9
Married .....	24	40	64	9	10	19	3	3	6	8	8	16
Widowed .....	.....	3	3	.....	1	1	.....	1	1	1	.....	1
Total .....	58	69	127	24	27	51	13	12	25	12	14	26

Shou  
 Pub  
 Par  
 Lac  
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 Sen  
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 Do  
 Dis  
 Epi  
 Gri  
 Fri  
 On  
 Int  
 Sy  
 De  
 La  
 Un

TABLE IX.

Showing the probable cause, apparent or assigned, of the disorders in the admissions, from Oct. 1st, 1899 to Sept. 30th, 1900.

CAUSE.	THE ADMISSIONS.		
	M.	F.	T.
Puberty .....	1	..	1
Parturition .....	..	5	5
Lactation .....	..	3	3
Climacteric .....	..	8	8
Senile decay .....	1	5	6
Business worries .....	4	4	8
Domestic worries .....	2	7	9
Disappointment in love .....	1	2	3
Epilepsy .....	2	..	2
Grief .....	1	9	10
Fright, .....	..	1	1
Onanism .....	8	..	8
Intemperance .....	6	..	6
Syphilis .....	..	2	2
Debility .....	7	11	18
La Grippe .....	1	1	2
Unknown .....	24	11	35
	58	69	127
History of Heredity in.....	26	30	56
"    Previous attacks in.....	17	12	29



TABLE X.

*Alleged Ages of all admitted.*

	1899—1900.	1859—1899.	TOTAL.
From 5 to 10 years .....		4	4
" 11 to 20 " .....	12	234	246
" 21 to 30 " .....	34	929	963
" 31 to 40 " .....	28	829	857
" 41 to 50 " .....	28	589	617
" 51 to 60 " .....	15	449	464
" 61 to 70 " .....	7	218	225
" 71 to 80 " .....	3	70	73
" 81 to 90 " .....		1	1
Unknown .....		125	125
Total .....	127	3448	3575

TABLE XI.

*Civil Condition of all Admitted*

	Married.	Single.	Widowed.	Unknown.	Re-admitted	Total.
1859-1899. { Males . . . .	619	819	61	20	306	1825
{ Females . . . .	599	616	127	10	271	1623
1899-1900. { Males . . . .	13	30	.....	.....	15	58
{ Females . . . .	36	22	1	.....	10	69
Total .....	1267	1487	189	30	602	3575

TABLE XII.

Former Residence (corrected by separation of Re-admissions).

	1899-1900.		1859-99.		Total. 1859-1900.	Population, 1891.
	Admissions.	Re-admissions.	Admissions.	Re-admissions.		
Halifax City and County . . . . .	21	4	811	210	1046	71,358
Colchester County . . . . .	14	2	224	45	285	27,160
Cumberland " . . . . .	12	..	165	28	205	34,329
Pictou " . . . . .	8	1	280	85	374	34,541
Antigonish " . . . . .	2	1	82	11	96	16,114
Guysborough " . . . . .	3	1	105	11	120	17,195
Inverness " . . . . .	2	..	66	3	71	25,799
Richmond " . . . . .	1	..	44	4	49	14,399
Victoria " . . . . .	3	..	50	8	61	12,342
Cape Breton " . . . . .	7	1	172	25	205	34,244
Hants " . . . . .	4	4	153	33	194	32,052
Kings " . . . . .	8	4	177	40	229	22,489
Annapolis " . . . . .	2	1	101	12	116	19,350
Digby " . . . . .	3	..	61	8	72	19,897
Yarmouth " . . . . .	2	4	62	14	82	22,216
Shelburne " . . . . .	1	..	47	5	53	14,956
Queens " . . . . .	2	1	45	10	58	10,610
Lunenburg " . . . . .	4	1	109	20	134	31,075
Newfoundland . . . . .			14	2	16	.....
New Brunswick . . . . .			13	..	13	.....
P. E. Island . . . . .			4	..	4	.....
Barbadoes and St. Thomas . . . . .			2	..	2	.....
British Guiana . . . . .			1	..	1	.....
United States . . . . .			20	1	21	.....
England . . . . .			6	1	7	.....
Ireland . . . . .			11	..	11	.....
Scotland . . . . .			2	..	2	.....
Germany . . . . .			3	..	3	.....
Norway . . . . .	1	..	2	..	3	.....
Sweden . . . . .	1	..	3	..	4	.....
India . . . . .			1	..	1	.....
Italy . . . . .			1	..	1	.....
H. M. Service . . . . .	1	..	18	..	19	.....
Unknown . . . . .			17	..	17	.....
	102	25	2872	576	3575	460,226

TOTAL.

4  
246  
963  
357  
617  
464  
225  
73  
1  
25

75

Total.

1825  
1623

58  
69

3575

TABLE XIII.

*Former Occupation as far as Ascertained.*

	1899-1900.		1859-1899.		TOTAL.	
	M.	F.	M.	F.	M.	F.
Agent and Wives	1	1	3	4	4	5
Architect and Wives			1	2	1	2
Barristers and Wives			4	2	4	2
Bailiff and Wife			1	1	1	1
Bakers and Wives			2	5	2	5
Banker's Wife				1		1
Bell-boy			1		1	
Blacksmiths and Wives		1	26	16	26	17
Barbers and Wives			4	1	4	1
Basket Makers and Wives				3		3
Brewers			1		1	
Book-Binders and Wives			5	2	5	2
Brass-Founders			3		3	
Broom-Maker			1		1	
Brakeman			2		2	
Butchers and Wives			6	2	6	2
Cooks				5		5
Carriage-Makers and Wives			3	1	3	1
Carpenters, Wives and Daughters	2	2	63	60	65	62
Conductor's Wife				1		1
Clerks, Book-keepers and Wives	2	3	41	10	43	13
Officers of Customs and Wife			6	2	6	2
Cabinet Makers and Daughters			7	3	7	3
Coat Maker				1		1
Coopers and Wives		1	16	2	16	3
Coachmen and Wives			3	3	3	3
Coppersmith			1		1	
Dyer			1		1	
Druggists	1		3		4	
Domestics		4		125		129
Engineers and Wives			13	10	13	10
Factory Employees			1	4	1	4
Farmers, Wives, Sons and Daughters	22	15	647	419	669	434
Ferryman			2		2	
Fishermen, Wives, Sons and Daughters	4	2	114	79	118	81
Fireman			1		1	
Gardener and Wives			1	4	1	4
Gentlemen and Gentlewomen			16	49	16	49
Governess				1		1

TABLE XIII.—(CONTINUED)—Former Occupation as far as ascertained.

	1899-1900.		1859-99.		TOTAL.	
	M.	F.	M.	F.	M.	F.
Grocers and Wives.....	2	.....	7	4	9	4
Hotel Keepers and Wives.....	1	.....	9	3	9	4
Hatter and Wife.....	.....	.....	2	1	2	1
Hostler.....	.....	.....	2	.....	2	.....
Housewives.....	10	.....	148	.....	158	.....
Light Keepers' Wives.....	.....	.....	3	.....	3	.....
Lobster Canner.....	.....	.....	1	.....	1	.....
Lumbermen and Wives.....	.....	.....	10	4	10	4
Labourers, Wives and Servants.....	5	4	255	245	260	249
Masons, Wives and Daughters.....	2	20	7	20	9	20
Messenger.....	.....	.....	1	.....	1	.....
Ministers, Wives and Daughters.....	.....	.....	6	11	6	11
Music Teachers.....	.....	.....	2	4	2	4
Millers and Wives.....	1	3	3	3	3	4
Merchants, Wives and Daughters.....	2	1	48	34	50	35
Milliners.....	.....	.....	16	.....	16	.....
Mechanics and Wives.....	1	12	3	12	4	12
Miners, Wives and Daughters.....	1	3	46	34	47	37
Moulders and Wives.....	.....	.....	4	3	4	3
Nurses.....	.....	2	.....	3	.....	5
Physicians, Wives and Daughters.....	.....	.....	9	3	9	3
Priests.....	.....	.....	6	.....	6	.....
Printers and Wives.....	1	.....	13	2	14	2
Painters and Wives.....	.....	.....	17	10	17	10
Pensioners, Wives and Daughters.....	.....	.....	2	6	2	6
Pedlers and Wives.....	.....	.....	10	2	10	2
Photographers.....	.....	.....	5	.....	5	.....
Plumbers, Tinsmiths and Wives.....	.....	.....	12	2	12	2
Postmaster.....	1	2	.....	2	.....	1
Potter.....	.....	.....	1	.....	1	.....
Railway Section-men.....	1	.....	2	.....	3	.....
Railway Porter.....	.....	.....	1	.....	1	.....
Reporter.....	.....	.....	2	.....	2	.....
Ropemakers.....	.....	.....	2	.....	2	.....
School-teachers, Wives and Daughters.....	.....	.....	34	34	34	34
Ship Captains, Wives, Stevedores.....	1	1	24	22	25	23
Sextons.....	.....	.....	2	.....	2	.....
Seamen, Wives and Daughters.....	4	1	92	47	96	48
Soldiers, Marines and Wives.....	.....	.....	18	4	18	4
Shoemakers and Wives.....	.....	2	27	11	27	13
Saddlers.....	.....	.....	4	.....	4	.....
Seamstresses.....	.....	1	.....	27	.....	28

TABLE XIII.—(CONTINUED.)—*Former Occupation as far as ascertained.*

	1899-1900.		1859-1899.		TOTAL.	
	M.	F.	M.	F.	M.	F.
Station Agents and Wives .....		1	2	....	2	1
Students .....			11	4	11	4
Shipwrights and Wives.....			11	5	11	5
Surveyors .....			1	....	1	....
Shopkeepers, Wives and Daughters.....			4	5	4	5
Sailmakers and Wives.....			3	1	3	1
Stonecutters .....			5	....	5	....
Tailors, Wives and Daughters.....			4	3	4	3
Tanners and Wives .....			9	5	9	5
Teamsters and Wives.....			15	5	15	5
Telegraph Operator and Wife.....		1	1	1	1	2
Tobacconists .....			1	....	1	....
Traders, Sons and Wives.....			10	4	10	4
Train Driver.....			1	....	1	....
Vagrants .....			3	1	3	1
Waiters .....	2	....	....	....	2	....
Weigher's Daughter.....			....	1	....	1
Wool Sorters.....			1	....	1	....
Wheelwrights .....			2	....	2	....
Washerwomen .....			....	6	....	6
Watchmen and Wives.....			3	3	3	3
Watchmakers .....			2	....	2	....
Weavers .....	1	....	2	1	3	1
Unknown .....	6	7	25	64	31	71

71  
 1  
 3  
 6  
 1  
 1  
 1  
 4  
 2  
 5  
 3  
 1  
 5  
 5  
 4  
 1  
 5  
 4  
 1  
 5  
 4  
 1  
 F.  
 TAL.

**TABLE XIV.**  
*Showing the Duration of the Disorder on Admission, of the Admissions, Discharges and Deaths from October 1st, 1899, to September 30th, 1900.*

CLASS.	DURATION OF DISEASE, ETC., IN FOUR CLASSES.																					
	THE ADMISSIONS.			THE DISCHARGES.						THE DEATHS.												
	M.	F.	T.	M.	F.	T.	Removed.	Relieved or Otherwise.	M.	F.	T.											
FIRST CLASS.																						
First Attack, and within three months of admission.	21	29	50	14	8	22	5	4	9	7	4	11	2	1	1	2	7	4	11	2	1	2
SECOND CLASS.																						
First Attack, above three and within twelve months of admission . . . . .	14	14	28	1	7	8	1	1	2	1	1	2	2	1	1	2	1	1	2	1	1	2
THIRD CLASS.																						
Not First Attack & within twelve months of admission	15	18	33	8	10	18	2	2	4	2	2	7	2	2	2	4	2	2	5	2	2	7
FOURTH CLASS.																						
First Attack or not, but of more than twelve months duration on admission . . . . .	8	8	16	1	2	3	5	5	10	2	2	6	2	2	2	4	2	2	4	2	2	6
Total . . . . .	58	69	127	24	27	51	13	12	25	12	14	26	12	12	12	25	12	12	14	12	12	26

TABLE XV.

*Maintenance of Patients in Hospital September 30th, 1900.*

COUNTY.	Males.	Females.	Total.
Annapolis.....	5	2	7
Antigonish.....	4	1	5
Cape Breton.....	18	8	26
Colchester.....	24	25	49
Cumberland.....	4	12	16
Digby.....	3	6	9
" Town.....	1	.....	1
Clare District.....	1	.....	1
Dartmouth Town.....	6	3	9
Guysborough.....	10	12	22
St. Mary's District.....	3	.....	3
Halifax County.....	10	11	21
" City.....	17	19	36
Hants, West.....	6	6	12
" East.....	2	5	7
Inverness.....	1	2	3
Kings.....	18	20	38
Lunenburg.....	5	8	13
" Town.....	.....	7	7
Bridgewater.....	.....	1	1
Chester District.....	5	2	7
Pictou.....	15	17	32
Richmond.....	1	2	3
Shelburne.....	.....	.....	.....
Barrington District.....	.....	4	4
Victoria.....	6	2	8
Yarmouth.....	5	2	7
" Town.....	3	1	4
Argyle District.....	3	.....	3
Queens.....	3	3	6
Province.....	13	13	26
Private.....	6	6	12
Brown and Bell Funds.....	.....	2	2
Indian Affairs.....	.....	1	1
Totals.....	198	203	401

TABLE XVI.

*Balances due Hospital, September 30th, 1900.*

Total.

7  
5  
26  
49  
16  
9  
1  
1  
9  
22  
3  
21  
36  
12  
7  
3  
38  
13  
7  
1  
7  
32  
3  
4  
8  
7  
4  
3  
6  
26  
12  
2  
1  
01

	Current Account.
Annapolis .....	\$ 262 66
Antigonish .....	228 28
Cape Breton .....	929 15
Colchester .....	1757 16
Cumberland .....	492 04
Digby .....	825 09
"    Town .....	34 15
Clare Municipality .....	258 84
Guysborough .....	842 78
St. Mary's District .....	101 00
Halifax County .....	723 02
"    City .....	1007 26
Dartmouth Municipality .....	577 40
Hants, West .....	417 96
"    East .....	68 56
Inverness .....	70 40
Kings .....	1347 46
Lunenburg .....	442 69
"    Town .....	230 21
Bridgewater, Town .....	33 35
Chester District .....	280 05
Pictou .....	1018 66
Richmond .....	109 65
Shelburne .....	.....
Barrington District .....	142 80
Victoria .....	288 40
Yarmouth .....	255 00
"    Town .....	87 29
Argyle District .....	118 50
Queens .....	215 45
Funds .....	160 16
Private Patients .....	5230 23
Indian Affairs .....	34 75
	<b>\$18590 40</b>



## TABLE XVII.

*Statement for Year.*

1899.		
Oct.	Stock on hand . . . . .	\$ 2,783 37
"	Warrants drawn . . . . .	6,062 85
Nov.	Warrants drawn . . . . .	5,410 09
Dec.	Warrants drawn . . . . .	8,429 55
1900.		
Jan.	Warrants drawn . . . . .	5,651 02
Feb.	Warrants drawn . . . . .	4,742 35
March.	Warrants drawn . . . . .	4,591 28
April.	Warrants drawn . . . . .	4,670 93
May.	Warrants drawn . . . . .	6,070 44
June.	Warrants drawn . . . . .	5,242 08
July.	Warrants drawn . . . . .	4,442 74
Aug.	Warrants drawn . . . . .	4,569 92
Sept.	Warrants drawn . . . . .	5,638 18
		\$68,304 80

## EXPENDITURE.

1900.		
Oct. 1.	Stock on hand . . . . .	2,783 37
	Warrants drawn for the year . . . . .	65,521 43
		\$68,304 80

TABLE XVII.—(CONTINUED.)

*Statement.*

1900.	
Amount of expenditure as per Table 19 .....	\$ 65,070 79
Amount deducted from Farm Account .....	330 73

Sept. 30. Stock on hand .....	2,903 28
	<u>2,903 28</u>
	\$68,304 80

## EARNINGS.

Return Premium .....	15 00
Maintenance and clothing .....	55,034 96
Sales accounts sundries .....	330 73
Water Rates .....	36 00
Deficiency .....	9,984 83
Stock on hand Sept. 30th .....	2,903 28
	<u>2,903 28</u>
	\$68,304 80

TABLE XVIII.

*Showing the amount received from Counties and other sources during  
the Year 1899-1900. (Income)*

Annapolis .....	\$1369 68
Antigonish .....	649 40
Cape Breton .....	3650 75
Colechester .....	6383 81
Cumberland .....	1835 23
Digby .....	914 16
"    Town .....	133 13
Clare District .....	.....
Dartmouth (Municipality) .....	1266 94
Guysborough .....	2935 28
St. Mary's District .....	404 53
Halifax City .....	3001 20
"    County .....	3357 31
Hants, West .....	2000 30
"    East .....	850 87
Inverness .....	193 87
Kings .....	4869 00
Lunenburg .....	1903 88
"    Town .....	723 80
Bridgewater .....	36 65
Chester District .....	1075 20
Pictou .....	4119 96
Richmond .....	464 22
Barrington District .....	429 44
Victoria .....	972 22
Yarmouth .....	724 05
"    Town .....	589 52
Argyle District .....	440 35
Queens .....	666 36
Funds .....	336 96
Private Patients .....	2342 64
Sundry Sales and Rents .....	330 73
Water Rates .....	36 00
Indian Affairs .....	10 70
Insurance Prem. returned .....	15 00
	<u>\$49033 14</u>

TABLE XIX.  
Expenditure.

		FOOD.	
		Apples .....	\$127 26
		Alspice .....	1 50
		Arrowroot .....	4 00
		Broma .....	45 00
		Baking Powder .....	62 00
		Berries .....	104 53
		Beans .....	68 47
		Butter .....	2382 65
		Barley .....	34 10
		Biscuit .....	119 88
		Beef .....	4646 55
		Cider .....	90
		Cocoa .....	4 20
		Citron .....	70
		Chocolate .....	1 75
		Cassia .....	3 36
		Corn Meal .....	83 90
		Cheese .....	112 26
		Cranberries .....	18 00
		Coffee .....	106 40
		Currants .....	47 15
		Cream Tartar .....	8 80
		Corn Starch .....	4 05
		Cocoanut, Des. ....	12 40
		Corn .....	47 20
		Carrots .....	3 20
		Canned Peas .....	4 80
		Essences .....	20 50
		Eggs .....	286 83
		Fish, Fresh .....	672 83
		Fowls .....	50 18
		Flour .....	2,500 95
		Fish Dry .....	423 64
		Figs .....	17 40
		Ginger .....	6 50
		Geese .....	79 15
		Hops .....	2 24
		Hams .....	276 95
		Haddies .....	45 06
		Herring .....	25 00
		Lobsters .....	11 95
		Lamb .....	117 52
		Lard .....	20 25
		Lemons .....	90
		Marmalade .....	2 80
		Mustard .....	14 85
		Malt .....	\$ 13 80
		Macaroons .....	70
		Milk .....	28 00
		Molasses .....	360 12
		Mutton .....	153 08
		Mackerel .....	29 90
		Macaroni .....	1 35
		Nutmegs .....	7 40
		Nuts .....	1 74
		Oatmeal .....	344 76
		Oranges .....	3 00
		Onions .....	39 98
		Oysters .....	4 80
		Peaches .....	16 35
		Preserves .....	36 10
		Pork .....	158 68
		Pickles .....	6 45
		Pepper .....	9 00
		Prunes .....	9 36
		Peas .....	104 39
		Potatoes .....	601 00
		Rice .....	137 91
		Raisins .....	82 88
		Rabbits .....	1 00
		Sour Krout .....	2 25
		Sugar, brown .....	158 87
		Sugar, white .....	426 50
		Sauces .....	9 70
		Salt .....	37 77
		Sausages .....	40 76
		Soda .....	4 00
		Sago .....	3 00
		Suet .....	11 16
		Syrup .....	2 50
		Salmon .....	16 28
		Tapioca .....	6 90
		Tea .....	823 46
		Tongues .....	8 40
		Tomatoes .....	7 40
		Turkeys .....	71 45
		Turnips .....	1 20
		Veal .....	2 86
		Vinegar .....	57 51
		Vegetables .....	20
		Wheat .....	7 20
			\$16,481 63

during

1369 68

649 40

3650 75

3383 81

1835 23

914 16

133 13

1266 94

2935 28

404 53

3001 20

3357 31

2000 30

850 87

193 87

4869 00

1903 88

723 80

36 65

1075 20

4119 96

464 22

429 44

972 22

724 05

589 52

440 35

666 36

336 96

2342 64

330 73

36 00

10 70

15 00

9033 14

TABLE XIX.—(CONTINUED.)

<i>Brought forward</i> .....		\$16481 63
MISCELLANEOUS.		
Clothes Props.....	\$ 86	Harness & Rep's\$ 50 50
Artificial Hand for Employee.....	46 85	Wheelwright.. 180 00
Binding Books.....	44 85	Medical Certifi- cates..... 115 00
Baskets.....	1 05	Insurance..... 1095 00
Employment Office.....	1 90	Printing..... 162 15
Gravel.....	25 95	Attendants' Uniforms... 133 46
Travelling Expenses.....	8 00	Industrious Pa- tients..... 49 06
Statute Labour.....	15 00	*Cows..... 241 00
Case Books.....	19 00	Cab Hire..... 85
Plants.....	3 15	Medical Books. 39 56
Repairing Clocks.....	3 50	Advances to Pa- tients..... 32 50
Directory.....	2 50	Water..... 200 00
Rustic Seat.....	1 70	Expenses on Parcels..... 1 32
Cabinet Bath.....	6 00	Organist..... 40 00
Buffallo Robe and Repairing.....	10 50	Recapture... 8 50
Sponges.....	1 20	Vertinary Sur- geon..... 98 50
Wax.....	2 40	Library..... 2 60
Dyes.....	85	Spectacles and Clocks..... 14 45
Assistance in Office.....	5 00	Musical Instru- ments Rep'd. 18 50
Carriage Wraps.....	5 50	\$2908 61
Sleigh.....	35 00	
Allowance to Supt. Attending Supts. Convention at Richmond.....	75 00	
Baskets.....	8 85	
Telephone.....	101 05	
<i>Carried forward</i> .....		\$19390 24

\* Cows purchased to replace those slaughtered for beef.

TABLE XIX.—(CONTINUED.)

Brought forward.....\$19,390 24

## HOUSE EXPENSES.

Blacklead.....	\$ 5 50	Potash.....	\$14 85
Blue.....	9 00	Razors & Strops	27 63
Brooms.....	102 18	Recreation....	109 02
Boots and Shoes.....	681 05	Rubber Sheets.	45 00
Brushes.....	71 99	Soap.....	335 41
Buckets.....	12 75	Shoe Blacking.	8 50
Brick (knife).....	2 80	Spoons.....	42 87
Candles.....	22 68	Shoes repaired.	65 35
Clay Pipes.....	8 45	Scissors.....	16 63
Crockeryware.....	160 70	Stamps.....	126 61
Coal.....	3481 89	Straw.....	393 32
Dry Goods.....	5423 77	Stationery....	192 11
Entertainment.....	27 60	Starch.....	57 92
Funeral Expenses.....	67 00	Tinware and re-	
Ferriage.....	119 83	pairs.....	148 32
Furniture.....	489 20	Tobacco.....	371 06
Floor Polish.....	65 55	Telegrams....	4 50
Gas Oil.....	41 85	Washing Soda.	14 22
Ice.....	77 71	Wash Boards..	2 25
Knives and Forks.....	29 65	Wash Tubs....	6 00
Light, Electric.....	965 29	Ward Books...	54 50
Matches (Safety).....	15 60	Wrapping Paper	4 25
Oil (Kerosene).....	35 64		<u>\$13958 00</u>

## SALARIES.

Officers.....	5108 32
Pay List.....	15821 38
	<u>\$20929 70</u>

## MEDICINE.

Liquors.....	76 64
Drugs.....	737 85
	<u>\$814 49</u>

Carried forward..... \$55092 43

TABLE XIX.—(CONTINUED.)

Brought forward.....\$55092 94

## FARM.

Oats.....	\$ 339 80	
Sundries for Stable.....	9 00	
Implements, Seeds, Horses, &c.....	580 10	
Pollard.....	145 00	
Bran.....	86 51	
	<u>\$1160 41</u>	
*Less sales, Pigs, Rents, &c.....	330 73	
		<u>\$ 829 68</u>

## REPAIRS.

Smith-work.....	133 45	
Repairs.....	2032 20	
Masons and Helpers' Wages.....	1085 12	
Carpenters' Wages.....	624 00	
Engineers' Assistants' Wages.....	1207 54	
		<u>5082 31</u>

## EXTRAORDINARY.

Balance on New Barn and Piggery.....	1036 62	
Bricks for New Stove Room in Laundry.....	69 00	
Fitting up Electric Light (wiring, etc.).....	1396 96	
Renewing Electric Bells.....	85 00	
Moving old buildings.....	283 75	
Improving Grounds and Painting Building.....	347 58	
Specification for Sewage building.....	300 00	
Lumber.....	547 46	
		<u>4066 37</u>

## SUMMARY OF EXPENSES FOR YEAR.

Food.....	16481 63
Salaries and Wages.....	20929 70
Medicine.....	814 49
House Expenses.....	13958 00
Miscellaneous.....	2908 61
Farm.....	829 68
Repairs.....	5082 31
Extraordinary.....	4066 37
	<u>\$65070 79</u>

\* Balance of sundry sales expended in thoroughbred Ayrshire cattle.

TABLE XX.

*Farm and Garden Produce, 1899—1900.*

Potatoes .....	630	bush.	Tomatoes .....	16	bush
Beets .....	126	"	Squash .....	100	"
Turnips .....	1130	"	Spinach .....	37	"
Mangolds .....	4000	"	Lettuce .....	20	"
Peas .....	10	"	Cucumbers .....	12	doz.
Beans .....	34	"	Celery .....	53	"
Onions .....	10	"	Corn .....	108	"
Rhubarb .....	50	"	Cabbage .....	66	"
Parsnips .....	10	"	Gooseberries .....	315	qrts.
Plums .....	5	"	Currants .....	400	"
Pears .....	10	"	Raspberries .....	60	"
Carrots .....	5	"	Hay .....	60	ton.
Apples .....	5	"	Green Feed .....	20	"
Herbs .....	8	"	Corn for Fodder .....	25	"
Beef .....	1060	lbs.			
Milk .....	48340	quarts			
Eggs .....	152	doz.			



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## APPENDIX A.

## REGULATIONS FOR THE ADMISSION OF PATIENTS

TO THE

## Nova Scotia Hospital for the Insane.

Whenever the admission of a patient is desired application should be made to the Medical Superintendent, who will at once transmit a blank form (the Statement). This form may be made out by the Physician, nearest relative, or friend, and the answers to the questions therein carefully and accurately written out, as it is the chief source on which reliance can be placed in so far as the previous history and present condition of the patient is concerned, and is entered on the records of the Hospital. It must be sworn to before a magistrate.

On receipt of the statement, an answer will be transmitted. If the case be one suitable for admission, two blank forms of Medical Certificate, and a blank Warrant in case of Patient chargeable to the Municipality, or blank form of Bond for Private Patient, will be sent to the applicant.

The Medical Certificates must be made out by duly qualified Medical Practitioners (those whose names are annually published in the "Royal Gazette,") or they cannot be received. *See Clause 21 Chapter 38, Revised Statutes, Fifth Series.*

These Certificates empower two County Magistrates to make out the Warrant and commit the insane person to the Hospital.

N. B.—In any county in which the Municipal Council has appointed Magistrates to commit insane persons to the Hospital for the Insane, two of those so appointed must sign the Warrant.

Upon presentation of proper Medical Certificates and Warrant, or Bond, at the Office of the Commissioner of Public Works and Mines, an order of admission will be furnished, with which order and the other papers accompanying the patient, admission to the Hospital follows.

In the crowded state of the Hospital, the Commissioner must give the preference of admission to presumably curable cases.

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

Those about to be committed to the Hospital should invariably be informed of it *before leaving home*. Everything like deception must be scrupulously avoided. No promises as to the precise time of their return should be made.

In order to be benefited by hospital treatment, patients should be placed under care at an early stage of the disease.

The following clauses of Chapter 38 of Revised Statutes, Fifth Series, are appended for information of those desiring the admission of a patient.

CLAUSE 21. In every case where admission is sought for a patient a statement in writing, in the form of Schedule A, shall be filled up and sworn to before some justice of the peace, by a party cognizant of the facts therein contained, and forwarded to the Medical Superintendent for examination; *and his answer and approval shall be received before the patient is forwarded*. No person shall be received into the Hospital for the Insane as a patient, without a certificate, as in Schedule B, from two qualified medical practitioners, in actual practice in the province, of whom the one shall not be the son, brother, partner, or assistant of the other, the examination therefor having been made not more than 30 days before admission.

CLAUSE 22. In case of private paying patients, a bond shall be given to the Commissioner of Public Works and Mines, with sufficient sureties for payment of expenses, and a payment of one quarter's board shall be made in advance. Such bond may be sued on as often as shall be necessary, and recovery had in the supreme or county courts, according to the amount sued for, and according to the ordinary practice of the court in like cases.

CLAUSE 26. In case such person shall have been certified to be insane by only one medical practitioner before his apprehension, he shall be again examined and certified, as in Schedule B, by two duly qualified practitioners, to be appointed by the Commissioner of Public Works and Mines, before he shall be admitted into the hospital.

CLAUSE 30. The Commissioner of Public Works and Mines, in the case of patients now in the Hospital for the Insane, or on whose behalf admissions are sought, and where in his judgment there are circumstances justifying a departure from the ordinary rates, may make special agreements for the amount and payment of board; and where a patient from violence or otherwise requires a special or extra attendant, such extra attendance shall be charged and paid for in the same manner as the ordinary charges.

N. B.—The Superintendent has no power to admit a patient without the order from the Commissioner of Public Works and Mines.

## DISCHARGE OF PATIENTS.

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

In cases of doubtful recovery, after six months' residence, it is now customary to grant leave of absence "on trial." If a relapse occurs before final discharge, the patient is at once re-admitted without any new formalities.

## SCHEDULE A.—STATEMENT.

*To be forwarded to the Medical Superintendent when application is made for the reception of a patient.*

Some member of the family or acquaintance (assisted by the attending physician, if practicable) should give a full and complete answer to each question. All facts thus given will be regarded as private or professional communication.

1. Name of patient (in full).
2. Where born.
3. Son (or daughter) of. Give names of parents, and state whether they are or are not blood relations.
4. Residence \_\_\_\_\_, County of \_\_\_\_\_
5. Age \_\_\_\_\_, last birthday.
6. State as to marriage. Single, married, or widowed.
7. Number and age of children. If female, give date of last child-birth.
8. Occupation (or that of father or husband).
9. Personal characteristics. Give any physical defects or peculiarities. Habits as a child and since then; disposition and tastes; success in business or condition of life. Has the patient any vicious habits, or always led a regular life; is he or she addicted to the moderate or immoderate use of alcoholic beverages, or a total abstainer?
10. Family history. Give all facts pertaining thereto—if any relations have been insane, hysterical, nervous, or have had fits, convulsions, or syphilis, and whether on paternal or maternal side. Has either parent been addicted to intemperate use of stimulants or narcotics?

11. Education.
12. Religion.
13. Previous attacks. State if patient has ever had convulsions, fits, or any previous attacks of insanity. The age at time of attack, its character, duration, and treatment employed. If sent to an asylum, state where, and the result of treatment. Give particulars of subsequent attacks, if any.
14. Previous health. Has patient ever had sunstroke, or any injury of head, or any other serious injury, or any serious disease, such as fever, ague, syphilis, gout, rheumatism, consumption or affection of the lungs, heart, brain, kidney, or other organ. Has patient ever been delirious, and if so give supposed cause.
15. Previous attack. Give date of any change in the usual condition of habits, disposition or temper. What was the change? Has he been rash or speculative of late in business, or has he exaggerated notions of his ability, strength, power, etc.? What has been done so far as regards care or treatment?
16. Assigned causes. Give supposed cause or causes, predisposing or remote, and the existing or present cause.
17. Duration of present attack. Give date of commencement.
18. Whether subject to epilepsy. State if patient has falling sickness or fits of any kind.
19. State as to sleep. Sleepless or restless at night.
20. Appetite for food. Natural, depraved, fastidious, or absent.
21. If dangerous to others, how? Give full particulars. State, every attempt to injure others. Was it from sudden passion or premeditation? Has the patient been subject to mechanical restraint or confinement, and if so, where and in what form, and for how long a time?
22. If suicidal, in what manner? State whether attempted or threatened, and how often.
23. Present condition. Whether in usual health, or feeble and emaciated. Is the voice natural, or is there hesitancy or stammering in speech? Is there any paralysis, or loss or power of limbs? Is sight and hearing natural? Is patient excited or quiet, pleasant or moody and irritable? What is the occupation during the day and night? Is there failure in memory, or are the ideas exaggerated?

24. What delusions? Give their characteristics? Are there false impressions concerning the individuality or surroundings? Are the ideas connected, or is the mind continually wandering? Is a word dropped or forgotten in conversation, or misspelled or absent in writing?

25. Present habits and propensities. Is the patient filthy in habits or language, or destructive of clothing, furniture or glass? Is there indulgence in secret vice, and if so, how long?

26. Pecuniary circumstances, and to whom chargeable. Answer both questions.

27. Name and address of

I. Physicians.

II. Party giving the history.

III. Correspondent to whom letters may be addressed.

IV. Telegraphic address.

I, A. B., make oath and say that to the best of my knowledge the above particulars are correctly stated, and I hereby request you to receive the above named . . . . ., whom I saw at . . . . . on the . . . . . day of . . . . . (being within one month from this date) as a person of unsound mind, as a patient, into the Nova Scotia Hospital for the Insane.

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Degree of relationship (if any) or other circumstances of connection with the patient.

Sworn to before me, one of Her Majesty's justices of the peace for the County of . . . . . this . . . . . day of . . . . . 19..

Name . . . . . J. P.  
Address . . . . .

N. B.—If any of the particulars in this statement be not known the fact is to be stated. *No patient to be sent to Hospital until a reply shall have been received to this statement.*

NOTE.—All letters of inquiry will receive a prompt reply. Severe illness or the occurrence of anything of moment, will be immediately communicated. Stamps must be enclosed to prepay reply.

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 SCHEDULE B.—CERTIFICATE.
 

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(a) <sup>†</sup>Name in full. I, the undersigned (a)  
 (b) <sup>‡</sup>Qualification. being (b) and in actual practice,  
 hereby certify that I, on the day of  
 (c) Locality. 18 , at (c) in the County of  
 separately from any other Medical Practitioner, personally  
 (d) <sup>†</sup>Name in full. examined (d)  
 (e) <sup>‡</sup>Residence. of (e) (f) and that the said  
 (f) <sup>‡</sup>Occupation. is a person of unsound  
 mind, and a proper person to be taken charge of and  
 detained under care and treatment; and that I have  
 formed this opinion on the following grounds, viz:

1. <sup>†</sup>Appearance. 1. Facts indicating insanity observed by myself:  
 2. <sup>‡</sup>Conduct.  
 3. <sup>‡</sup>Conversation.

(g) <sup>†</sup>State the information and from whom. 2. Facts indicating insanity communicated to me by others: (g)

Name,

Place of Residence

Date,

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

## APPENDIX B.

NOVA SCOTIA HOSPITAL FOR THE INSANE.  
TRAINING SCHOOL FOR NURSES.

The authorities of the Nova Scotia Hospital for the Insane, having established a School for Nurses, offer to give men and women desirous of becoming professional nurses a two years' course of training in general nursing, with special reference to the care of cases of nervous and mental disease.

Those wishing to receive such a course of instruction must apply to the Superintendent of the Nova Scotia Hospital for the Insane, Halifax, N. S.

The most desirable age for candidates is from twenty-one to thirty-five years. *They must be in sound health, and must send in with their application a certificate from a physician certifying to the fact, also, one from some responsible person as to their good character.* Upon the recommendation of the Superintendent of the Hospital and the approval of the Honorable Commissioner of Public Works and Mines, they will be received for two months on probation, at the expiration of which time they will, if accepted, sign an agreement to complete the prescribed course of two years.

The Superintendent of Nurses has charge of the Training School, under the authority of the Superintendent of the Hospital and of the Honorable Commissioner of Public Works and Mines; and the Nurses are subject to the rules of the Hospital. Their fitness for the work and the propriety of retaining or dismissing them at the end of the two months of trial is determined by the authorities in charge of the School. They reside in the Hospital and serve as assistant nurses in the wards.

All nurses are required to be sober, honest, truthful, trustworthy, punctual, quiet, orderly, cleanly, neat, patient, kind and cheerful.

The instruction includes the general care of the sick; the managing of helpless patients in bed, in moving, in changing bed and body linen, making of beds, etc.; giving baths, keeping patients warm or cool, preventing and dressing bed sores; bandaging, applying of fomentations, poultices and minor dressings; the preparing and serving of food, the feeding of helpless patients and those who refuse food; the administering of enemas and use of the catheter; attendance upon



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patients requiring diversion and companionship; the observation of mental symptoms, delusions, hallucinations, delirium, stupor, etc.; and the care of excited, violent and suicidal patients.

They are also given instruction in the best practical methods of supplying fresh air, warming and ventilating sick-rooms, in a proper manner, and are taught to take proper care of rooms and wards, to keep all utensils perfectly clean and disinfected, etc.; to observe the sick accurately in regard to the state of the secretions, pulse, breathing, skin, temperature, sleep, appetite, effect of diet, of stimulants, and medicine, the giving of massage, and the managing of convalescents.

The instruction is given mainly by the Superintendent of Nurses and the Hospital Medical Staff. Examinations, chiefly upon practical points, take place from time to time.

Nurses are required to wear at all times, while on duty in the wards, the Hospital uniform dress.

When the full term of two years is completed, the nurses thus trained receive (after final examination) diplomas certifying to their period of training, their proficiency and good character.

The right is reserved to terminate connection of any nurse or pupil with the school, for any reason which may be deemed sufficient.